County Council of the County of Lanark EDUCATION COMMITTEE

THIRTY-SIXTH ANNUAL REPORT

MEDICAL INSPECTION,
SUPERVISION, AND TREATMENT
OF SCHOOL CHILDREN.

1944-45

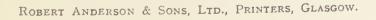


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TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE OF THE COUNTY OF LANARK.

I beg to submit the Thirty-sixth Annual Report on the Medical Inspection, Supervision and Treatment of School Children in the County of Lanark for the year ended 31st July, 1945.

This Report has been condensed as much as is possible consistent with a clear statement of the working of the School Medical Service during the past year. All the important facts of the work of the School Medical Service during the past year are recorded either in the text or in the statistical tables. The scheme of this Report is in accordance with the Memorandum on School Health Administration issued by the Department of Health for Scotland.

JOHN YOUNG,
Executive School Medical Officer.

School Medical Inspection Department, County Offices, Hamilton, December, 1945.

STAFF.

Executive School Medical Officer. JOHN YOUNG, L.R.C.P. & S. Ed., D.P.H.

Assistant School Medical Officers.

ANN K. CORMACK, M.B., Ch.B.

JANET B. CUNNINGHAM, M.B., Ch.B., D.P.H.
ISABEL C. DARLING, M.B., Ch.B., D.P.H.

(a) ALEX. C. DOUGLAS, M.B., Ch.B., D.P.H.

VIDA J. PERRY, M.B., Ch.B.

MARION A. PRENTICE, M.B., Ch.B. (Temporary Appointment).

ERNEST G. Y. THOM, M.B., Ch.B. (Temporary Appointment).

Dental Surgeons.

R. JARDINE BEATTIE, L.D.S.

(b) WILLIAM GIBSON, L.D.S.

MARY H. HINSHELWOOD, L.D.S.

ANNE G. JACKMAN, L.D.S. (Temporary Appointment).

ANDREW C. F. RANKIN, L.D.S.

ARCHIBALD W. M. WATSON, L.D.S.

ELIZABETH WATSON, L.D.S.

JAMES McD. WEATHERSTON, L.D.S.

Part-Time Ophthalmic Surgeons.

JAMES HILL, M.B., Ch.B., D.O.M.S. H. SOMERVILLE MARTYN, M.A., M.B., Ch.B. JOHN A. MORTIMER, M.D., F.R.C.P.E.

Part-Time Ear, Nose and Throat Specialist. ROBERT A. GRAY, M.B., Ch.B.

Nurses.

MARY M. BENNET.
HELEN S. BERTRAM.
JESSIE M'K. BLACK.
MARTHA CHISLETT.
RACHEL DOBIE.
ANNIE N. DOUGLAS.
FLORENCE D. FLEMING.
ADA FOWLIE.
JEAN HANNAH.
AMY S. T. HISLOP.
MARGARET K. LAMOND.

AGNES L. D. MILLER.
MARJORY K. M'DOUGALL.
ISABEL MACKINNON.
JEAN G. M'GHIE.
NEILINA M'INNES.
MARGARET NEILSON.
HELEN PARK.

(c) ANNE J. SORLEY.

MARGARET C. R. SUTTER.

MARY A. YATES.

Nurses (Temporary Appointment).

MARGARET RUSSELL.

(d) MARY WALLACE

MARIA HUGHES.

(e) EMILY M'GEE

ELIZABETH C. M. M'DONALD.

Dental Attendants.

MARY GOLD.
MARGARET JAMES.

SARAH M'GHIE. ELIZABETH M'KENZIE.

Clerical Staff.

Chief Clerk-ROBERT A. M'ROBBIE.

(f) JAMES BISHOP.

CATHERINE ROACH.

(g) JOHN PORTER.
MARY W. BOYD.

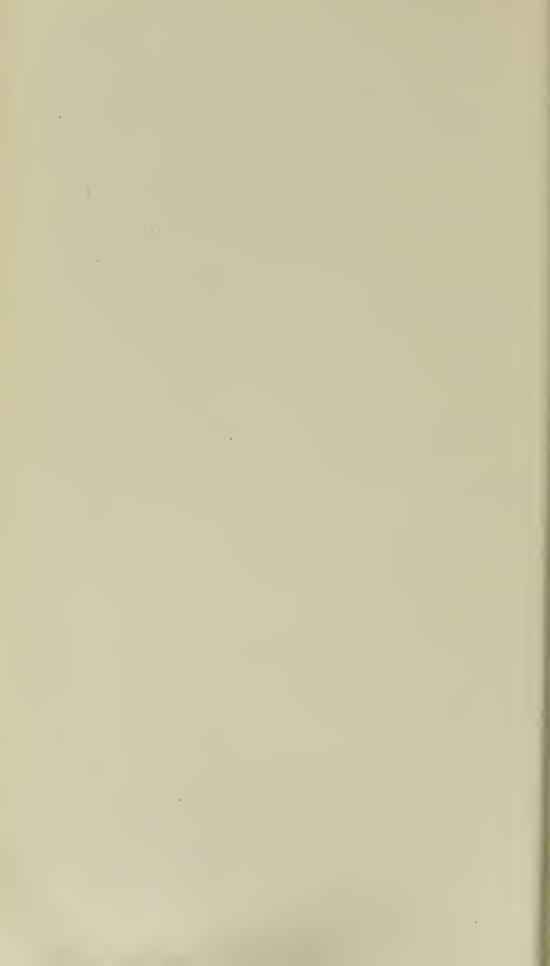
JESSIE SPEIRS. HELEN S. STEVEN.

Clerical Staff (Temporary Appointments).

MARK ALLAN.

BARBARA MONAGHAN.

- (a) On Active Service with H.M. Forces, 16/1/43.
- (b) On Active Service with H.M. Forces, 9/10/41.
- (c) On Active Service with H.M. Forces, 1/2/41.
- (d) Appointed 9/2/44.
- (e) Appointed 26/1/44.
- (f) On Active Service with H.M. Forces, 27/2/41.
- (g) On Active Service with H.M. Forces, 3/6/42.



REPORT on the MEDICAL INSPECTION, SUPERVISION, and TREATMENT of SCHOOL CHILDREN in the COUNTY of LANARK, for the year ended 31st July 1945.

I. LIST OF STAFF.

The personnel of the medical, dental, nursing and clerical staffs—both whole and part-time—is shown on page 4 of this Report. Changes in personnel which have occurred since the last report are also indicated.

2. GENERAL STATISTICS.

The number of schools in the educational area is as follows:—

(a)	Primary	• • •						211
(b)	Junior Sec	ondary						14
(c)	Secondary							13
(d)	1. Special	Schools				• • •		11
	2. Special	Classes a	at Cer	tified Ir	istituti	ons		2
*Numbe	er of childre	en on the	e scho	ol regist	ters		• • •	84,713
*Numbe	er of childre	en in ave	erage	attenda	nce			72,255

^{*(}The figures are taken from the official return for June, 1945.)

3. SANITARY CONDITION OF SCHOOLS.

No new school buildings have been erected. Existing buildings have been maintained in as satisfactory a condition as is possible owing to the restrictions imposed during the war years. Repairs are carried out as the need arises and school fabrics and fitments have been kept in as good a state of fitness as is possible. The Medical Officers, on their visits of inspection to the schools, have made comprehensive surveys of buildings, classrooms, lavatories, cloakrooms, etc. Note has also been taken of the suitability of lighting, heating, ventilation and water supplies. Defects have been recorded for the attention of appropriate departments. It will be easily understood that, as during the years of war only minor repairs, etc., could be carried out, a considerable amount of more extensive repairs and replacements will be necessary when circumstances permit of these being done. On the whole the sanitary condition of the schools has been satisfactorily maintained.

4. ORGANISATION AND ADMINISTRATION.

A. System and Extent of Medical Inspection and Treatment. There has been no change in the system and extent of medical

inspection and treatment. As formerly the routine inspection of the four groups of children in the schools of the educational area was carried out. It is satisfactory to record that it was found possible to complete the ordinary routine inspection at all the schools. The revisiting of the schools to ascertain the degree of response that had been made to advice given by the Medical Officers at their previous visit to the schools and to examine children who had been absent on that occasion was unavoidably restricted. This was due to extra duties which the Medical and Nursing Staff were engaged in, principally, carrying out of a nutritional survey of certain groups of children, engaging in an immunisation drive and investigation of an outbreak of ringworm in the Burghs of Airdrie and Coatbridge. These and other extra duties combined to limit the number of revisits it was possible to make. In consequence fewer visits were paid to the schools. This cannot be described as desirable but could not be avoided in the circumstances. Frequent visits to the schools are necessary to attain and maintain good results. The total number of children examined at the routine inspections is lower than in the previous year. Those children who were absent at inspection will be examined during the incoming year. Evacuee children are not now shown separately as the numbers were very much reduced.

The scheme of treatment throughout the year was well maintained. The various clinics—minor ailments, visual, dental and ear nose and throat—functioned as in previous years with the exception of the last named. Operative treatment of tonsils and adenoids at Cleland Hospital was suspended owing to war exigencies for the most of the year. Limited numbers of children were operated on at Stonehouse Hospital during a part of this time. This eased the situation somewhat and there is a reasonable prospect of being able soon to renew activities at Cleland.

Fuller information regarding the working of the various clinics will be found in the later pages of this report.

B. System and Extent of Dental Inspection and Treatment.

No change falls to be recorded and the service functioned as in previous years. Subsequent to the Medical Survey, already mentioned, of certain groups of children for nutritional estimation, a Dental Survey of the same children was undertaken at the request of the Department of Health for Scotland.

Details of the working of the Dental Scheme will be found in the later pages of this report.

C. School Nursing and Arrangements for "Following Up."

No change in the arrangements falls to be recorded. The service continued to operate satisfactorily in spite of increased commitments of an extra and temporary nature.

D. Co-ordination with Public Health Services.

Close co-operation with the Medical Officers of Health of the County and Burghs exists. The various Medical Officers of Health are at all times willing to help the school service by providing facilities for ultra violet ray treatment, X-raying of cases and in other ways. The school service is always ready to help in any schemes of mutual advantage such as Immunisation against Diphtheria, so far as lies in their power to do so.

E. Co-operation with Voluntary Bodies.

This has been dealt with in previous reports. The school service is especially indebted to the help of the Royal Society for the Prevention of Cruelty to Children.

F. Co-operation with Teachers and Parents.

The relationship between the School Medical Officers and the teachers is one of close co-operation. It is essential that this should be so, otherwise Medical Inspection of School Children would inevitably suffer. The Medical Officers appreciate the help which is given by the teachers. Medical Officers also have frequent opportunities for giving advice to parents especially at routine inspections, minor ailments clinics and the examination of special cases.

5. THE FINDINGS OF MEDICAL INSPECTION.

The total number of children who were examined at the routine medical inspection of the schools was 24,201. This figure includes any evacuees who still remain in the educational area. The numbers are now so small as to be negligible and are not given separately. Of the 24,201 children examined routinely, 12,202 were boys, and 11,999 were girls. This is a smaller number than was recorded for the previous year, the difference being due to the smaller number of revisits it was possible to make to the schools. This was due to extra duties which the medical staff had undertaken and it was found to be impossible to examine those children who were absent at the first routine inspection of the schools. These children will be examined during the incoming year. It was not found

necessary to drop any of the age groups due for examination and this must be considered very satisfactory. Details of the numbers of children examined in the various age groups will be found in Table IA.

The number of children who were presented as special cases to the medical officers by the Head Teachers during the routine visits to the schools was 4,193. The number of reinspections was 2,174. Four thousand, five hundred and eighty of the children who were examined at the routine medical inspections were notified to their parents as requiring treatment of some defect. This does not include the number of children who were notified for uncleanliness or dental caries.

The conditions found at the routine inspections of the four age groups are recorded in Table II at the end of this report.

There is no evidence that the nutritional state of the children has deteriorated. The "Milk in Schools" Scheme and the School Meals Scheme are important factors in helping to maintain a good standard of health and nutrition in the school population.

The following table gives the average heights and weights of school children throughout the educational area of the County of Lanark contrasted with the Anthropometric Committee's Standard. It will be observed that, so far as heights and weights are an index of nutritional fitness, the following figures are satisfactory:—

AVERAGE HEIGHT IN INCHES.

Age.	51/2		9	1 2	12½	
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Anthropometric Committee's Standard County of Lanark	41·2 42·9	41·0 42·4	50·7 51·4	50·0 50·8	56·0 56·5	56·8 57·3

AVERAGE WEIGHT IN LBS.

AGE.	5 1		91/2		121	
Anthropometric Com	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.
Anthropometric Com- mittee's Standard	40.5	40.0	64.9	59.3	79.4	80.2
County of Lanark	43.9	41.6	63.8	60.7	82.05	82.4

A special detailed examination of three hundred children to assess their nutritional state was undertaken at the request of the Department of Health for Scotland. An account of this survey with tabular statement of details will be found in the later pages of this report.

Clothing conditions show an improvement over those of the previous year. Five hundred and thirty-two boys and five hundred and fifty-six girls were recorded for deficiencies of clothing, a percentage of 4.5 as against 7.1 in the previous year.

The state of the children's footgear also shows an improvement. One hundred and four children were found to have defective footgear, a percentage of 0.43, as compared with 0.69 during the previous year. The quality of children's footwear has not been of a high standard for some years.

Uncleanliness of the head continues to be an unsatisfactory feature, especially amongst girls. Of 24,201 children examined, 154 boys (1.26 per cent.) and 2,337 girls (19.47 per cent.) were found to be suffering from unclean heads. Uncleanliness includes infestation with lice, nits, or simply non-verminous dirty conditions. With the return of more normal conditions in our national life, it is hoped that there will be an improvement in these conditions. Engagement of women in munitions and other forms of war work, overcrowding, dearth of houses, especially with adequate means for cleansing, and a decreased sense of responsibility of parents towards their children, have all played their part in various degrees in maintaining a lowered standard of personal cleanliness. It must not be assumed that these cases of neglect of cleanliness are all of a very bad degree. A great deal depends on the standard that is accepted as satisfactory and it has been the invariable practice in Lanarkshire to set a very high standard. The School Medical Officers and Nurses, therefore, record all cases of uncleanliness, however slight they may be. Infestation of the body with vermin is happily not now so common as it used to be. There has been a progressive improvement in this respect.

Uncleanliness (Body).—The number of children found to be defective in this respect was boys, 299 or 2.45 per cent.; girls, 318 or 2.6 per cent.; a total of 617 or 2.5 per cent. These figures are an improvement on those of the preceding year. It has to be noted that uncleanliness of body means chiefly simple dirtiness

without infestation with body vermin. Verminous clothing and bodies which at the beginning of school medical inspection were all too common have progressively got very much reduced in number until now they are comparatively rare.

Ringworm Head.—This condition is very intractable and difficult to cure. Nineteen boys were found to be suffering from this skin disease, giving a percentage of 0.16. Only two girls were discovered similarly affected, a percentage of 0.02. Total number of cases 21 or 0.08 per cent.

Impetigo Head is more common—72 boys (0.59 per cent.) and 68 girls (0.57 per cent.) were found to be affected, a total of 140 or 0.58 per cent. Other diseases of head totalled 77 in boys and 51 in girls, a total of 128 or 0.5 per cent.

Ringworm of Body.—Unlike ringworm of the head is very easily cured. Eleven boys and 11 girls were recorded, a total of 22 or 0.09 per cent.

Impetigo Body.—Ninety-eight boys (0.8 per cent.) and 49 girls (0.4 per cent.) were found to be suffering from this condition, a total of 147 or 0.61 per cent.

Scabies.—This condition has been very prevalent during the war years, but it must not be assumed that the war was responsible or the outbreak of this disease. This skin affection was definitely increasing for a considerable time before the outbreak of war. Whether it would have assumed the proportions it did, but for the war, is a moot point. A perusal of the following table shows the incidence of scabies amongst the school children in the County of Lanark from 1926 to the present time. It will be observed that for two years before the onset of hostilities scabies was definitely increasing and continued to do so until the peak years, 1941 and 1942. Since the latter year there has been a decline in its prevalence due, no doubt, to the measures taken to treat active cases and to prevent its spread. The School Medical Service has had the active cooperation of the public health services with County and Burghal areas. The combined effort appears now to be yielding results

and there is a refreshing fall in the number of cases recorded. The following table gives the annual figures from 1926:—

Year.	No. found at School Inspection	Percentage.	No. treated at School Clinics.
1926-27	35	·108	55
1927-28	38	·118	125
1928-29	25	·081	143
1929-30	42	·133	167
1930-31	44	·139	246
1931-32	54	·175	308
1932-33	52	·162	338
1933-34	45	.143	299
1934-35	43	.142	305
1935-36	28	·09 4	241
1936-37	46	·158	436
1937-38	71	·2 4 9	656
1938-39	64	·29	1,014
1939-40	138	.56	1,524
1940-41	150	· 5 9	2,527
1941-42	292	1.1	4,473
1942-43	351	1.37	3,980
1943-44	526	2.01	3,685
1944-45	273	$1 \cdot 12$	2,709

Other Diseases of the Body.—This includes all diseases of the skin of the body other than ringworm, impetigo and scabies. The numbers recorded are Boys, 410 or 3·36 per cent.; Girls, 344 or 2·87 per cent.; a total of 754 or 3·1 per cent. This is approximately the same figure as for the year previous.

Malnutrition.—There are two categories, slight and bad. Under the heading "Slight" are grouped all those minor degrees of malnutrition which are attributable to a great many causes and are not necessarily due to any lack of food. The figure for slight malnutrition is 633 or 2.6 per cent., as compared with 901 or 3.4 per cent. in the year previous. The figure for bad malnutrition is very low. Eleven cases were recorded—a percentage of 0.04 as compared with 20 cases and a percentage of 0.07 in the previous year. These figures must be regarded as very satisfactory. There is no doubt that the provision of milk and meals in schools supple-

menting the equitable system of rationing has in a large measure been responsible for the continued maintenance of a satisfactory standard of nutrition.

Oral Sepsis.—Under this heading are grouped all those septic conditions which affect the gums and mucuous membranes of the mouth. Neglected dental caries is responsible for many of these conditions. Three hundred and ninety-one children or a percentage of 1.6 were recorded. This percentage is identical with that of the preceding year.

Diseases of Nose.—This embraces all defects and diseased conditions of the nose. Nine hundred and twenty-three cases were recorded for observation purposes only. This is a percentage of 3.8. The most important of nasal conditions is adenoids. Those recorded, numbering 358, were cases for operation. This gives a percentage of 1.47 which compares with 2.3 in the preceding year. Other conditions of nose totalled 536 or 2.2 per cent.

Conditions of Throat.—These include observation cases and tonsils for operations. Conditions for observation totalled 4,258 or 17.6 per cent.

Tonsils for treatment gives a figure of 1,471 or $6\cdot 1$ per cent. Both these percentages are lower than for the previous year.

Glands for Observation totalled 3,073 or 12.7 per cent. as contrasted with 4,401 or .16.8 per cent. in the preceding year. Those requiring treatment numbered 57 or 0.23 per cent. One hundred and twenty-two or 0.46 were recorded during the year previous.

Diseases of the External Eye.—These include the following conditions:—

Blepharitis	• • •		Number	recorded	381	or	1.6	per cent.
Conjunctivitis		• • •	,,	"	66	"	0.27	,,
Corneal Opacitie	es		"	,,	20	,,	0.08	,,
Squint			,,	,,	458	,,	1.89	,,
Other Diseases			,,	,,	100	,,	0.4	,,

The above percentages are practically the same as for the year previous.

Vision.—Is divided into two categories:—

- (1) Those children wearing glasses or with minor degrees of defect and not requiring spectacles. These totalled: boys, 1,112; girls, 1,303, or a percentage of 9·15 and 10·8 respectively.
- (2) Those children needing examination by the School Ophthalmic Surgeons. The figures for this group are: boys, 578; girls, 645; or 4·7 per cent. and 5·4 per cent, respectively.

Infant children are not included in these groups.

The number recorded in Group I shows a decrease from that of the preceding year.

In Group 2 conditions in boys show a fall and in the girls there is a slight increase.

Ear Diseases.—Two groups, Otorrhoea or "running ear" and Other Diseases of Ears. Otorrhoea is equally divided between the sexes, 111 boys (0.9 per cent.) and 112 girls (0.9 per cent.) were recorded. This gives a total of 223 or 0.9 per cent. Boys show a decrease and girls a considerable increase on last year's figures. Other Diseases shows a total of 83 or 0.3 per cent.—a decrease from last year.

Defective Hearing.—Children who, on account of deafness, need a favourable position in class (front seat, etc.) total 92 or 0.4 per cent.

Children who need special training on account of deafness. These totalled 2 or 0.008 per cent.

Children who, in addition to severe deafness, have language disability (deaf mutism, etc.). One was recorded or 0.004 per cent.

The last two groups of children are sent to special schools. The total number of children found to be defective was 95 or 0.39 per cent., identical with the figure for the preceding year.

Speech.—(Two Groups).

- (1) Defective articulation totals 82 or 0.34 per cent.
- (2) Stammering. Thirty cases were recorded—a percentage of 0·12.

These figures show an identical figure in group one and a considerable drop in group two as compared with those of last year.

Mental and Nervous Conditions.—

Dull and backward children totalled 166 or 0.68 per cent.

Mentally defective (educable children—33 were recorded or 0.13 per cent.

These children are admitted to special schools.

Mental defective (ineducable children—3 were recorded or 0.002 per cent. These children are unsuitable for training in special schools and are reported to the General Board of Control for Scotland.

Nervously unstable and difficult children—24 cases were recorded.

These are children suitable for attendance at Child Guidance Clinics.

Heart Diseases are of three kinds.—

- (1) Congenital heart disease—40 cases or 0.16 per cent.
- (2) Acquired heart disease—123 cases or 0.51 per cent.
- (3) Functional heart disease—291 cases or 1.2 per cent.

These figures show a decrease in all categories as compared with the previous year's totals.

The decrease is especially marked in the Functional Group, which shows a fall of 50 per cent.

Diseases of Lungs.—

- (1) Chronic bronchitis—100 cases or 0.4 per cent. were recorded. This is a reduction from the previous year's figures.
- (2) Suspected tuberculosis of lungs—5 cases or 0.02 per cent. were recorded. This figure is identical with the figures for the previous year. Cases of suspected tuberculosis are reported to the Medical Officers of Health of the County or Burghs.
- (3) Other diseases of lungs—includes all diseases of the lungs which do not come under groups one and two—663 cases or 2.7 per cent. were recorded. This a considerable improvement on last year's figures.

Deformities may be congenital or due to infantile paralysis, rickets, accidents and other causes.

Congenital deformities—51 cases or 0.2 per cent.

Due to infantile paralysis—33 cases or 0.13 per cent.

Due to rickets—239 cases or 0.9 per cent.

Due to other causes—109 cases or 0.45 per cent.

The total number of deformities from all causes was 432 or 1.7 per cent.—a slightly higher figure than that for the year previous.

Seventeen cases of infectious disease were encountered in the school population during the year. These are excluded from school at once.

Under the heading "Other Diseases and Defects" are included all those diseases and conditions which have not been mentioned in the preceding paragraphs. Five hundred and seventy-one were recorded. The nature and numbers of the more important are as follows, in order of frequency:—

Anaemia, 249; enuresis, 69; debility, 40; obesity, 22; enlargement of thyroid gland, 20; injuries, sprains, etc., 16; hypothyroidism, 13; rheumatism, 11; laryngitis and tracheitis, 9; threadworms, 8; tonsillitis, 6; chorea, 6; diabetes, 4; hernia, 4; coeliac disease, 4; gastroenteritis, 4; chronic appendicitis, 3; ganglion, 3; habit spasm, 3; nephritis, 2; acidosis, 2; amputations, 2; hydrocephalus, 2; undescended testicle, 2; Bell's paralysis, 2; and one each of the following, Perthe's disease, Hirschsprung's disease, Banti's disease, lipoma, fibrositis, vitamin deficiency, post-diphtheritic paralysis, migraine, cyclical vomiting, osteomyelitis.

EXAMINATIONS CONDUCTED BY THE SCHOOL MEDICAL STAFF OTHER THAN ROUTINE SCHOOL EXAMINATIONS.

In addition to the routine work, a large number of special examinations are made by the School Medical Staff. These are of very varied character. A considerable number of these are cases referred for special examination by the various School Management Committees on account of absenteeism or other reasons. The nature and extent of these examinations can be most easily indicated by a tabular statement. This is as follows:—

(a)	Absentee children or irregular attenders			994
(b)	Physically and mentally invalid children	at	special	

(1) Physical 506 (2) Mental 404

schools or classes :--

(c)	Physically or mentally invalid children for admission	
	to special schools:—	
	(1) Physical	138
	(2) Mental	49
(<i>d</i>)	Applicants for part-time employment (Employment	
	of Children Act)	215
(e)	Examinations under Children and Young Persons	
	Acts:—	
	(1) Juvenile delinquents	114
	(2) Guardianship cases	31
(<i>f</i>)	Necessitous children (feeding, clothing, boots, etc.)	60
(g)	Members of Education Committee Staff (teachers,	
	janitors, school cleaners, clerical staff, etc.)	17
(h)	Students in preliminary training for the teaching	
	profession	4
(i)	Applicants for participation in the Committee's	
	Holiday Camp Scheme	1,356
(<i>j</i>)	Deaf or deaf-mute children	1
(<i>k</i>)	Blind children	1
(l)	Certification of ineducable children to the General	
	Board of Control	28
(m)	Diphtheria Immunisation:—	
	(1) Number of inoculations	3,650
	(2) Number of sessions involved	115
(n)	Children for admission to the Convalescent Home	
	at Wiston Lodge	154
(0)	Children for presentation under the Rehabilitation	
	Scheme	6
(p)	Children for examination under the Orthopaedic	
	Scheme	184

NUTRITIONAL SURVEY.

During the last quarter of 1944 a nutritional survey of certain groups of children was carried out at the request of the Scientific Advisory Committee (Nutrition Sub-Committee) Department of Health for Scotland.

The survey consisted of a detailed examination of three hundred school children in Lanarkshire. Boys and girls were chosen in as nearly equal numbers as circumstances permitted. The children were divided into two groups, namely, Infants, Entrants born in 1939 who had recently enrolled at schools, and Leavers, children born in 1931. These groups were of equal size numbering 150

children in each. A further sub-division was made, the children being divided in equal proportions into three categories according to the occupation of the father. In Lanarkshire, their categories were (1) Children whose fathers were engaged in Heavy Industry; (2) Children whose fathers were engaged in Coal Mining; and (3) Children whose fathers were engaged in Agriculture (Farmers and Agricultural Workers). This meant the examination of 50 entrants and leavers in each of the three categories. In order to secure uniformity of opinion one Medical Officer carried out the entire survey. To obtain as good a cross section of the aducational area as possible, children in schools in different parts of the Country and Burghal areas were surveyed. In the case of those whose fathers were engaged in Heavy Industries, schools in Cambuslang Area and Motherwell Burgh were chosen. For those children whose parents were miners, schools in Cambuslang, Carluke, Craigneuk, Forth and Motherwell supplied the requisite numbers. For the last section, Farmers and Agricultural Workers, sixteen schools in the rural areas of the County were visited. There was not much difficulty in obtaining sufficient numbers of children whose fathers were engaged in Heavy Industry or Coal Mining, but in the case of those whose fathers were Farmers or Agricultural Workers a great deal of difficulty was experienced and was only accomplished by visiting a large number of schools in the rural areas of the County. Especial difficulty was found in the number of entrants. The number in this category conforming to requirements in the matter of age was surprisingly small and throws an interesting sidelight on the state of the rural population throughout the County. It was found to be necessary to visit 16 schools in order to get the required number of children (50).

The actual examination was of a very searching and detailed nature and in consequence took a considerable amount of time to carry out. Each child was examined according to a prescribed schedule of points for investigation. Accurate heights and weights without clothing formed an important part of the examination. The weighing machines had previously been overhauled in order to secure accuracy. Heights were taken to the nearest quarter inch and weights to the nearest quarter of a pound. The various questions on the examination schedule were designed to elicit an accurate estimation of the nutritional condition of the children, their response to exercise and their state of well being. Details of these questions and the findings of the Medical Officer will be found in the accompanying statistical table.

The parents of the children were informed prior to the examinations and were requested to be present if possible. A parent usually accompanied the younger children, but in the case of the older children did not appear so frequently. The children who were examined were not selected individuals. They were chosen at random from lists of names supplied by the Head Teachers of the various schools. The co-operation of the Head Teachers was willingly given and assisted very much in the smooth working of the survey.

A survey of the same children in regard to their dental condition was carried out during the early month of 1945 by one of the Dental Officers. This examination was at the request of the Department of Health and was on similar lines to the Medical Survey, to which it was complementary. This survey also occupied the Dental Officer for a considerable time, which was extended as, owing to the inclement weather prevailing at the time, absences of the children from school were numerous, necessitating more than one visit to the schools. A certain number of the children left school and others were transferred to other schools. Consequently the numbers are not quite the same as in the Medical Survey. In the tabular statement of the dental findings, Groups C and D (Farmers and Agricultural Workers) are grouped together and are not shown separately. Both medical and dental examinations were carried out with the least possible interruption of the children's education.

Tabular statements of the details of the Medical and Dental Surveys will be found at the end of this report.

6. MEDICAL TREATMENT.

A. MINOR AILMENTS.

The minor ailments clinics continued to function as in previous years. Attendances were well maintained and there is no diminution in the number of children who avail themselves of the treatment afforded at the clinics. Parents very often accompany the children and co-operate with the medical and nursing staffs. The clinics are sited at health centres in the County and Burghs or at premises adjacent to schools. Prior to the war, Minor Ailments Clinics were held daily in each of the special schools, a trained nurse being in attendance. During the war, with the requisitioning of the special schools and the removal of the children to alternative accommodation where facilities for clinics did not exist, minor ailments have been treated at nearby established clinics. Drumpark, Dalton

and Woodburn Special School children are treated at clinics at Coatbridge, Cambuslang and Hamilton respectively. Knowetop Special School, Motherwell, has a fully-trained nurse in daily attendance.

The conditions treated at the 12 established minor ailments clinics fall within four main groups—eye diseases, diseases of the ear, diseases of the nose, and skin diseases. Treatment is free. The number of children attending these school clinics continues to be high. During the past year the total number of children treated was 17,052. Of these 1,445 were treated for eye diseases; 767 for ear diseases; 235 for conditions of the nose; and 14,605 for skin diseases. The attendances for treatment were—eye diseases, 11,840; ear diseases, 8,733; diseases of the nose, 2,473; skin diseases, 69,971—a total of 93,017.

As in previous years it will be observed that skin diseases predominate. Of the 17,052 children treated at the 12 established clinics, those attending for skin diseases numbered 14,605, or a percentage of 85.6.

Full details of the number of different conditions treated at the Minor Ailments Clinics will be found in Table VII at the end of this report.

Below will be found a statement of the number of children treated and the attendances made at the Committee's twelve established clinics:—

Established Clinics.

Clinic.	Medical Officer.	Children treated.	Attendances made.
Airdrie	Dr. Darling	2,399	16,103
Baillieston	Dr. Robertson	1,193	7,855
Bellshill	Dr. Perry	1,617	7,918
Blantyre	Dr. Cormack	1,370	5,804
*Cambuslang	Dr. Cunningham	1,917	9,018
Coatbridge	Dr. Darling	2,861	14,277
Hamilton	Dr. Thom	1,355	8,364
Larkhall	Dr. Thom	744	3,483
Motherwell	Dr. Prentice	855	4,952
Rutherglen	Dr. Cunningham	1,448	7,542
Shotts	Dr. Wilson	284	1,304
Wishaw	Dr. Prentice	908	5,868
		16,951	92,488

^{*} In addition, nurses of the school staff treated 101 children (with 529 attendances) for scabies at the Health Institute, Cambuslang.

[†] Conducted by the staff of the County Public Health Department.

Emergency Clinics.

Clinic.				Children treated.	Attendances made.
Blackwood				207	811
Lesmahagow				351	1,393
Carluke				437	3,657
Carnwath				234	2,161
Lanark		• • •	• • •	183	873
Forth				178	1,925
Stonehouse				576	2,576
Strathaven				894	4,162
East Kilbride				731	2,528
Benhar	• • •	• • •		531	3,455
Mobile Clinic	• • •	•••	•••	369	3,880
				4,691	27,421

The special school clinic at Knowetop, Motherwell, has a trained murse in daily attendance. The number of treatments given to children in this school was 8,470.

Ultra Violet Ray constitutes an important provision for the treatment of certain disabilities of school childrer. At six centres situated in the County area, viz., Blantyre, Baillieston, Bellshill, Cambuslang, Larkhall and Shotts, this form of treatment is available to selected cases. During the year under review the total number of cases treated amounted to 944. In addition school children resident in the Burghs are referred to the Medical Officers of Health who willingly afford similar treatment. A word of thanks is due to them for their active co-operation.

B. Defective Vision and Squint.

The scheme of visual treatment continued as in previous years without modification. The three part-time ophthalmic surgeons who carry out treatment at fixed visual clinics deal with all cases of visual defects found by the School Medical Officers in their tours of duty round the schools or at the minor ailments clinics. Full retinoscopic examination is carried out in all new cases and suitable glasses are prescribed or other treatment advised according to the nature of the defect found. Children supplied with glasses, either free or at contract rates, depending on the parental circumstances, are recalled at suitable intervals to have their glasses checked to ascertain if they are fitting properly and are according

to prescription. Glasses, according to the prescriptions of the School Ophthalmic Surgeons, are supplied by opticians, sited in suitably convenient centres.

The total number of new cases examined during the course of the year by the Ophthalmic Surgeons was 1,941. Re-examination of those children who had glasses prescribed and were reviewed in order to see that the glasses were correct was carried out in 5,186 cases. The total attendances made at the visual clinics numbered 7,127. One thousand seven hundred and eighty children had glasses prescribed for them and 161 were treated in other ways.

By arrangement with the Education Committee, fifteen Dutch children, accommodated at Glengonnar Camp, Abington, were examined in June, 1945, for visual defects by one of the School Ophthalmic Surgeons. Fourteen of these children were found to be in need of spectacles which were prescribed. Supply was arranged through one of the contractual opticians. The cost of examinations and supply of glasses was borne by the Netherlands Government.

A detailed statement of the results of visual treatment during 1944-45 will be found in Table VI at the end of this report.

The examination and treatment of children for errors of refraction is not the only function of the Ophthalmic Surgeons. Operative treatment of squints is arranged for in suitable cases. They also are available for advice regarding treatment of eye conditions at the Minor Ailments Clinics. Many eye conditions other than visual defects are seen and prescribed for by the Ophthalmic Surgeons during their attendances at clinics. Hospital treatment is arranged for in suitable cases. During the year the following conditions were seen at the Visual Clinics:—

Squint (convergent, divergent and alternating), 488; corneal ulcers, 5; corneal opacities, 48; blepharitis and conjunctivitis, 33; phylotenular conjunctivitis and keratitis, 16; choroido-retinal changes due to myopia, 1; nystagmus, 15; optic atrophy, 2; cataract, 10; choroidal atrophy, 1; synechia, 1; hordeolum, 6.

C. Nose and Throat Operative Treatment.

Operative measures for the removal of tonsils and adenoids continued as formerly with the exception that at Cleland Hospital, one of the principal centres for this work, the wards set aside for the accommodation of the children were required to house old

bedridden people from the bombed areas in the south of England, chiefly London. In consequence, the operative work at this hospital had to be suspended. This continued throughout the remainder of the year and proved a serious handicap in the treatment of throat conditions. A number of the children were treated at the Carnegie Health Institute, Motherwell, and also by arrangement with the County Public Health Department at Stonehouse Hospital. This helped to a limited extent to overcome the difficulty by getting the more urgent cases attended to, but the long-continued loss of the hospital facilities considerably reduced the extent and effectiveness of the service. The other operation centres, which are sited at Motherwell (Carnegie Health Institute), Douglas (Lady Home Hospital), Lanark (Lockhart Hospital), and Biggar (Kello Hospital), all continued to function without interruption during the year. Treatment at these centres is not confined to the removal of tonsils and adenoids, but extends to ear and nose conditions. The Ear, Nose and Throat Specialists are also available for consultation.

The following statement shows the nature of the work and the number of cases treated by the Ear, Nose and Throat Surgeons:—

Stonehouse Hospital. (Dr. R. A. Gray.)

(Dr. R. Gray.)	
Number operated on for enlarged tonsils and adenoids	21
Number treated without operation	$\frac{7}{28}$
Number of attendances made by patients	101
Carnegie Health Institute, Motherwell.	
(Dr. R. A. Gray.)	
Number operated on for enlarged tonsils and adenoids	234
	1,048
Time occupied by surgeon-hours	98
Time occupied by anaesthetist-hours	88
Lady Home Hospital, Douglas.	
(Dr. R. A. Gray.)	

Lockhart Hospital, Lanark.

Number operated on for enlarged tonsils and adenoids

(Dr. C. E. Scott.)

Number operated on for enlarged tonsils and adenoids 63

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D. ORTHOPAEDIC SCHEME.

The main features of this scheme were given in last year's report. During the past year full advantage has been taken by parents to have the deformities and crippling disabilities of their children attended to. Children suffering from orthopaedic conditions can be examined by the Orthopaedic Surgeon at clinics held in the County Hospital, Motherwell, and at Stonehouse Hospital. Special boots and appliances are supplied on the recommendation of the Orthopaedic Surgeon. The services of a Consultant Orthopaedic Surgeon are available. Children who require operative measures are treated in Philipshill Hospital and at Stonehouse Hospital. After-care is carried out by orthopaedic sisters. In several cases artificial limbs have been supplied. The scheme fulfils all the requirements of a complete orthopaedic service. The operative side is of special importance as in suitable cases so much can be done by surgical treatment to restore limbs to functional usefulness. The following statement shows the number of children examined at the main and subsidiary clinics, also the number of children treated by operative and other measures, at Philipshill and Stonehouse Hospitals:

Clinic.		First Visits.	Revisits.
County Hospital, Motherwell	 	96	75
County Hospital, Stonehouse	 	10	12
After-Care Clinics	 	78	709

Surgical and Other Treatment.

Philipshill Hospital 57

Stonehouse Hospital 11

Special boots and appliances were supplied to 40 children by the Education Committee at a cost of £153 8s. 9d., of which £52 6s. was recovered by instalments from the parents.

7. DENTAL INSPECTION AND TREATMENT.

The inspection and treatment of school children throughout the educational area proceeded on the same lines as in former years. No new departure from established practice falls to be recorded. All school children from five to eighteen years of age are inspected at least once annually. In a considerable number of areas two inspections and subsequent treatment were overtaken. The time of the Dental Staff was fully occupied with the routine work of inspection and treatment except in one

instance where one of the Dental Officers was engaged for some weeks on the special dental investigation which formed part of the Nutritional Survey undertaken for the Department of Health and was complementary to the special Medical Survey which had been completed some short time previously. This special dental survey covered the same children so that combined medical and dental data were available for a comprehensive estimation of the nutritional state of the children examined. This of necessity absorbed a portion of the time usually devoted to routine work. To secure uniformity this part of the nutritional survey was carried out entirely by one of the Dental Officers.

The total number of examinations made routinely by the Dental Officers during the year was 124,241, which is slightly less than in the year previous. The numbers found to have dental defects were boys, 30,109 and girls, 29,649—a total of 59,758 or 48 per cent. of those examined. This percentage of defects is lower than that for the preceding year. For a number of years this figure has been declining and it would appear to be indicative of a gradual improvement in the dental condition of school children as a whole. This is borne out by the observations of the Dental Officers, who find on examination a decided improvement in the dental condition of the children even in those who do not regularly or at all participate in the treatment afforded by the school dentists. The excellent condition of the teeth of the five year old children especially is remarked on by the dental staff. It is quite common to find children of five years of age with perfect sets of teeth. This was not so in pre-war years and raises the question—Is this decided improvement due to war-time diet with the special issues to pre-school children of milk, cod liver oil, fruit juices, etc.? Such would appear to be the case and with the "Milk in Schools" Scheme and dinners at school continuing to assist in maintaining a good standard of nutrition, it is reasonable to expect an improvement in the dental condition of the children.

The number of children accepting treatment is still very much below the one hundred per cent. mark. Of 59,758 children notified as requiring dental treatment, 14,507 actually availed themselves of the treatment afforded. Rural areas show better returns than urban and industrial areas. This is noted as a yearly occurrence. The general upset associated with the war is

undoubtedly the cause of a good deal of this apathy in regard to dental treatment and will no doubt become less as more normal times reappear. The number of extractions of both temporary and permanent teeth shows a reduction on last year's figures. Conservative treatment by fillings is practically the same as during the previous year. Other conservative treatment, such as scaling, etc., shows an increase.

Of the 14,507 children treated 5,862 were necessitous and received free treatment, while 8,645 were in the fee-paying class.

Mr. Beattie treated four children who were temporarily resident at Wiston Lodge.

He also treated 65 children at Glengonnar Camp, Abington. These children were Dutch refugees. Their treatment was at the request of the Department of Health and the Dutch Government, who agreed to defray the cost. The treatment covered approximately three days.

Two children who required a general anaesthetic were treated at the Dental Hospital, Glasgow, by arrangement.

Below, in tabular form, will be seen a statement of the work carried out by the Dental Officers:—

Dental Officer.	No. of Children treated.	Extractions (temp. teeth).	Extractions (perm. teeth).	Fillings (Amalgam or Cement)	Other treatment (cleaning, scaling, etc.).
Mr. Beattie	 2,241	2,344	408	674	283
Mr. Rankin	 1,900	2,300	317	746	493
Mr. Watson	 2,213	2,577	225	543	64
Mr. Weatherston	 2,107	2,488	456	1,201	794
Miss Watson	 1,958	2,099	212	836	533
Miss Hinshelwood	2,278	2,698	367	1,281	166
Mrs. Jackman	 1,878	2,955	215	1,213 .	398
Total	 14,575	17,461	2,200	6,494	2,731

At the end of this report will be found Table V, which shows the details of dental inspection and treatment throughout the whole educational area during the past year.

8. SPECIAL SCHOOLS AND CLASSES.

The four special schools under the control of the Education Committee continued to function as in previous years. The schools are sited as follows:—Hamilton (Woodburn Special School), Coatdyke Junior Instruction Centre (Drumpark Special School), Cambuslang Iunior Instruction Centre (Dalton Special School) and Motherwell (Knowetop Special School). Two of these schools, viz., Drumpark Special School and Dalton Special School were entirely requisitioned by the Military Authorities during the war and temporary accommodation was found for them at Coatdyke Junior Instruction Centre and Cambuslang Junior Instruction Centre respectively. Part of Knowetop Special School was also requisitioned and used as an A.R.P. post and cleansing station, and a war-time nursery. In consequence, these special schools operated in a somewhat restricted manner. Each of them has now been handed back to the Education Committee, but they are not yet available as special schools. This should not now be long delayed and the schools will be able to resume their full activities again.

The children accommodated in these schools are of two categories, physically invalid children and mentally retarded children. During the past year, 138 physically invalid children and 49 mentally invalid children were admitted to the four special schools. Greater difficulty was experienced with the admission of mental cases than with physical ones due to the shortage of accommodation available and the slower rates of circulation in the case of mentally invalid children. A number of mentally invalid cases had to wait for considerable periods before admission. The restriction of means of transport also operated adversely to the extent that, in the case of certain children living in districts which could not be visited by the school buses, difficulty was experienced in making provision for them. As more normal conditions are likely to prevail in the near future an improvement in this respect will follow.

Deaf mute and educationally deaf children receive instruction in the School for the Deaf, Hamilton, situated in part of Townhead Public School.

Certain children, who for various reasons cannot attend the School for the Deaf, Hamilton, are accommodated in the Royal

Deaf and Dumb Institution, Edinburgh, St. Vincent's School for the Deaf, Tollcross, Glasgow, and Langside Deaf and Dumb Institution.

Blind and educationally blind children receive instruction at the Royal School for the Blind, Edinburgh, or at St. Vincent's School for the Blind, Tollcross, Glasgow.

Infirm and crippled children, who are unsuitable for special school training, are educated at Eastpark Home for Infirm Children, Glasgow.

Epileptic children who, on account of the severity of the disease, are unsuitable for education in ordinary or special schools, are admitted, if suitable, for training to the Colony of Mercy for Epileptics, Bridge of Weir.

Below will be found a tabular statement of the number of children receiving education in special schools, the siting of the schools and the conditions from which the children suffer.

Physically Invalid Children.		
At the four special schools		506
At Eastpark Home for Infirm Children, Glasgow		4
At the Colony of Mercy, Bridge of Weir (Epileptics)		6
Mentally Invalid Children.		
At the four special schools		404
At Birkwood Certified Institution, Lesmahagow		4
At St. Charles Certified Institution, Carstairs		4
Deaf, Deaf-Mute or Educationally Deaf Children		
At the School for the Deaf, Townhead, Hamilton		30
At the Royal Deaf and Dumb Institution, Edinburgh	h	19
At St. Vincent's School for the Deaf, Tollcross		30
At Langside Deaf and Dumb Institution		3
Blind or Educationally Blind Children.		
At the Royal School for the Blind, Edinburgh		3
At St. Vincent's School for the Blind, Tollcross		3

Sixty-four physically invalid children attending the four special schools improved sufficiently in health to allow of their transfer to ordinary schools.

Of mentally invalid children 30 obtained suitable employment, and 41 physically invalid also secured work appropriate to their condition.

There were no acceptances for rehabilitation.

Children who, by reason of mental defect so pronounced that after trial in the invalid schools were found to be incapable of profiting by the instruction afforded there, were reported to the General Board of Control for Scotland as ineducable.

9. ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE.

A, B, C, and E have been fully reported on in Report for 1938-39.

D. HOLIDAY CAMPS.

The Holiday Camps which have become an established feature of the holiday period of July were held as usual. The camps are sited at schools in the Upper Ward of the County and are six in number. Two of the camps situated at Strathaven Academy and St. Mary's R.C. School, Lanark, respectively, accommodate Roman Catholic children. One camp is set aside for children from the Committee's Special Schools and is sited at New Lanark P. School. The other three camps, which are stationed at Biggar Higher Grade. Douglas West P. School and Leadhills P. School, house children from Protestant Schools. An innovation from previous years was the provision of accommodation at Biggar H.G. School for double the usual number of children. The children are medically examined twice before setting out for the camps to exclude the possibility of the introduction of infectious or contagious diseases and to assure that all the children are clean and in every way fit to be in intimate contact with each other. Those who do not fulfil these requirements are not allowed to go. Children who, at the first medical examination, held approximately one month before holiday time, are found to be suffering from debarring conditions which can be remedied in time are given the opportunity of treatment at the Minor Ailments Clinics.

The camps were up to their usual high standard of cleanliness and were kept clean and tidy by the children. Teachers accompany the children to the camps and supervise all arrangements. This is a purely voluntary service and reflects great credit on those teachers who, many of them, year after year, devote a considerable part of their own holiday to this work. At the camp for special school children, nurses of the School Service perform a like service in addition to the teachers. The children enjoyed the holiday and there was no case of serious illness to record. The total number of children accommodated at the camps was 532, and 64 supervisors

gave their services. The period of camping is one week for each group of children except in the case of Special School Children where the period is two weeks. The following statement shows the siting of the camps and the categories of children participating:

Lanark (New Lanark P. School)—Invalid children from the Committee's four special schools; first fortnight, boys; second fortnight, girls.

Lanark (St. Mary's R.C. School)—R.C. Boys' Camp.

Douglas (Douglas West P. School)—Girls' Camp.

Strathaven (Strathaven Academy)—R.C. Girls' Camp.

Leadhills (Leadhills P. School)—Boys' Camp.

Biggar (Biggar H.G. School)—First fortnight, boys' camp; second fortnight, girls' camp.

10. OTHER ACTIVITIES IN RELATION TO THE HEALTH OF SCHOOL CHILDREN.

These include the School Meals Service, the "Milk in Schools" Scheme, the provision of Tonic Food to suitable cases, the supply of boots and clothing to necessitous children, the scheme for rehabilitation and the consultant service.

SCHOOL MEALS SERVICE.

A full account of the service appears in the Report for 1942-43. Since that time there has been a steady extension of all the facilities for the production and distribution of meals to school children throughout the educational area. In May, 1942, the average number of children partaking of school meals was in round figures 9,500. In June, 1943, this figure had increased to about 20,000, and at the present time the average number is approximately 36,000, which represents 42 per cent. of the total school population. Provision of meals during the war years has been a difficult matter on account of the restricted variety of foodstuffs available, but has been carried out as well as circumstances permitted and has proved to be a success. The quality of the food has been good and there has been an absence of any serious complaint. The provision of knives and forks in addition to spoons is being extended and this will add to the cultural side of the meals. Without doubt the provision of a hot mid-day meal at school has been of value in maintaining a satisfactory standard of nutrition amongst school children.

This scheme has now been in operation for a considerable number

[&]quot;MILK IN SCHOOLS" SCHEME.

of years and has become a routine proceeding throughout the schools in the educational area. The milk which is supplied is either Grade A, T.T., or milk of an equal standard of purity. It is obvious that a high standard of purity is desirable when milk is supplied to school children, and this has been a matter of great concern to the public health authorities, who have made every endeavour to assure that a high standard is maintained. At present most of the milk consumed in Lanarkshire Schools comes from farms in the County, and it is the policy of the Education Committee to eventually have all of the milk supplied to schools coming from County farms. This will shorten to some extent the interval between the supply of milk from the cow and the consumption by the school children. The ideal arrangement would be the one in which the interval between production and consumption was the shortest possible and where handling and processing was reduced to an absolute minimum. There is no doubt that the daily ration of milk to school children is a valuable addition to their diet and there has not been any serious or widespread illnesses in schools attributable to its use. The rate of consumption is fairly uniform throughout the year. A considerable number of children whose parents are in necessitous circumstances are supplied with milk free of cost and children who are debilitated are, on the recommendation of the School Medical Staff, granted a double ration of milk daily. Below will be found in tabular form according to months a statement of the average number of children partaking of milk compared with corresponding periods in the previous year and also during 1935-36, the first year of the scheme:-

Month	Free	3044.45	1049 44	1935-36
Month.	Issues.	1944-45	1943-44.	1930-30
September, 1944	1,478	56,025	59,279	46,122
October, 1944	1,545	60,357	62,606	44,294
November, 1944	1,465	56,426	57,934	43,214
December, 1944	1,433	52,225	53,711	40,010
January, 1945	1,420	53,712	55,625	37,729
February, 1945	1,416	53,574	58,608	38,385
March, 1945	1,403	54,335	58,569	38,621
April, 1945	1,476	55,502	60,637	38,847
May, 1945	1,361	50,749	58,944	38,910
June, 1945	1,488	52,425	56,886	39,200

It will be seen from the above table that many more children now partake of milk than at the inception of the scheme. Tonic food in the form of cod liver oil and malt is supplied to necessitous children on the recommendation of the school medical officers. This is also a routine practice at the four special schools. Free boots and clothing were also supplied where, from their absence or poor condition, the child was not able to take full advantage of its education.

REHABILITATION SCHEME.

This scheme was fully explained in last year's report. The response to getting parents to avail themselves of the benefits of this service has not been very encouraging. This is probably due to the ease with which children of sixteen from the special schools can obtain employment although in many cases it may be a dead-end occupation. Considerable numbers of these children get employment which gives immediate monetary returns but does not fit the boy or girl for more skilled and settled occupations. The principle of immediate returns rather than ultimate benefits appears to find favour in a considerable number of cases. The children suitable for training under this Scheme are mostly children who are passing out of the special schools at age sixteen and who are suffering from physical disability. Mental cases are not admitted to the scheme. During the past year there were no acceptances for training under this Scheme, the children having got employment otherwise.

CONSULTANT SERVICE.

This is a most useful service and deals with cases of special difficulty which are encountered by the school medical officers and also more especially children in attendance at the special schools who, in spite of good surroundings, good food and extra nourishment, are not responding to this treatment. The Consultant Physician who attends at Motherwell County Hospital by arrangement can be consulted in regard to any school child. After examination, a full report of the consultant's findings is available with suggestions for treatment. A copy is sent to the child's family doctor for his information. This service also affords expert opinion, when required, of cases submitted to the School Medical Service for special examination such as appointments, superannuation cases, etc. During the past year the Consultant Physician has examined and reported on 31 cases.

INTENSIVE COURSES IN FIRST AID AND HOME NURSING.

These courses, which are held in secondary schools and are open to children who have completed the leaving certificate examination, are arranged in the interval between the completionof the leaving certificate examination and the summer holidays. The courses in first aid are open to both boys and girls. Those in home nursing are for girls only. It was hoped that attendance at these classes would stimulate interest in the nursing profession, which at the present time is so much in need of new recruits. This object can definitely be said not to have been attained. Nursing, as a profession, is at present not attractive to suitable girls and, until the training conditions are made more attractive and more in conformity with conditions of training in other vocations, propaganda in the form of classes in home nursing will not have the desired effect. It is quite clear from the poverty of the response to classes in home nursing that nursing as a profession does not attract many girls who go to secondary schools. Out of 13 secondary schools in the educational area only in 4 was there a sufficient number of girls to justify the holding of a class in home nursing. Those who did attend the classes were interested in the work and in the limited time available acquired a sound knowledge of the principles of nursing. The examinations, which were held at the end of the course under the auspices of the Red Cross Society, were very successful, the results being uniformly good.

The classes in first aid continue to be popular. Both boys and girls can attend. Eleven of the secondary schools in the educational area had classes. This is two more than in the previous year. The children appear to enjoy the instruction given and very quickly become expert at the practical work of the course. That the scholars take an intelligent interest in the subject is evident from the good results of the examinations which are held at the end of the series of lectures and demonstrations. The classes are affiliated with the St. Andrew's Ambulance Association and conform, in respect of instruction given and form of examination, to their regulations. There is no doub that these classes are of practical value to boys and girls, as in many appointments a knowledge of first aid is a desired qualification.

The following tabular statements of the classes in first aid and home nursing show the schools participating, the number of pupils and the results of the examinations held:—

Intensive Course in First Aid and Ambulance Work. (Session 1945).

	,	,		
School.	Tumber of Pupils enrolled.	Pupils presented for examination.	Pupils who gained Proficiency Certificates.	Pupils who gained Medallions.
Airdrie Academy	35	27	25	2
Biggar High	20	19	15	4
Coatbridge Secondary	45	34	30	4
Dalziel High,				
Motherwell	33	. 31	31	-
Elmwood Secondary,				
Bothwell	45	39	35	4
Hamilton Academy	67	63	57	6
Lanark Grammar	26	22	21	
Larkhall Academy,	38	33	17	16
Our Lady's High,				
Motherwell	39	37	36	1
Uddingston Grammar	21	12	10	
Wishaw High	35	35	34	1
Totals	404	352	311	38

Intensive Course in Home Nursing. (Session 1945).

School.	Number of Pupils enrolled.	Number of Pupils presented for exam- ination.	Number of Pupils who passed the elementary examination.	Number of Pupils who gained higher awards.
Coatbridge Secondary	7 16	12	12	
Elmwood Secondary, Bothwell	. 45	18	15	3
Hamilton Academy	35	33	33	
Wishaw High	. 15	14	14	
Totals	. 111	77	74	3

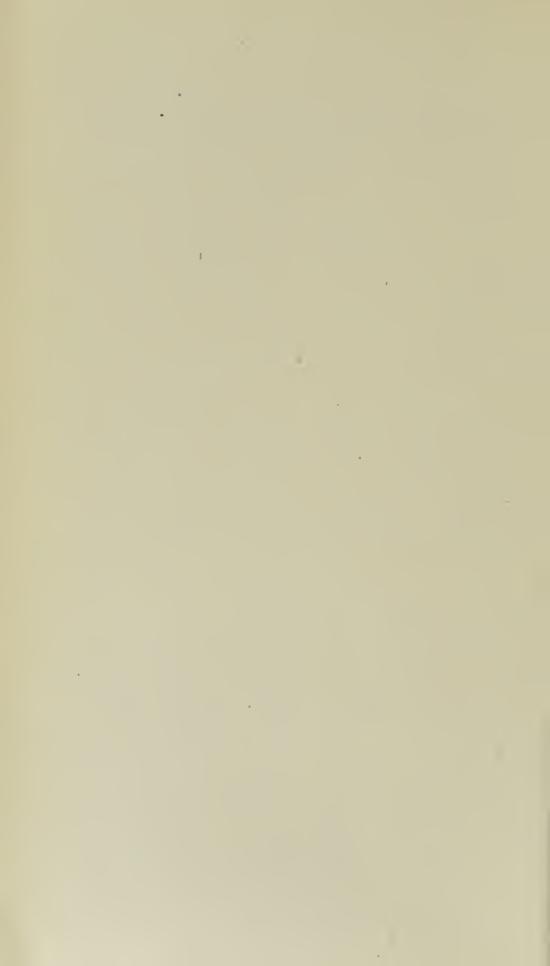


TABLE I. (1944-45).

Total number of children examined at A. Systematic Examinations:—

Ordinary Schools	Entrants . Second Age Group Third Age Group	ip		0 0 0 0 0 0	• • •	7,607 8,108 8,019
Secondary Schools	Age Group .	** ***	•••	• • •	a = 0	467
		Total	• • •	• • •	• • •	24,201
D. O	F					
	Examinations :—					
Special	(Non-routine) Cas	ses	• • •	•••	• • •	4,193
Re-insp	pections by Medica	al Officers		• • •	• • •	2,174
		Total	• • •	• • •		6,367

Number of individual children inspected at systematic (routine) examinations who were notified to parents as requiring treatment (exclusive of uncleanliness and dental caries):—

Ordinary Schools	Entrants Second Age Group Third Age Group	 р	• • •	• • •	a * 0	1,506 1,694 1,345
Secondary Schools	Age Group	• •••	• • •	+ + a	• • •	35
		Total		4 0 4	4 * *	4,580



SYSTEMATIC EXAMINATIONS (1944-45).

		ż		Unclean-			SH	KIN.					1		NASO-PHA		-						_	Ti .																				
_		facto	Incte	LINESS.		HEAD,			Post		MALNU- TRITION				IIASO-FHAI	KYNX.					EYES.					Ears.			SPEEC	ен.	Men	AL AND N	RVOUS Co	NDITION,		HEART	i.	L	JUNGS,		Deform	ITIES,		1 3
_	ined.	nsatis	Insati		-	1	_		Body.			_		Nose.	Тн	ROAT.	GLAND	s.	Exte	RNAL DIS	SEASES,		*VISUAL ACUITY.	Dis	SEASES.	Defe	CTIVE HEAD	RING.				1.	· ·	ble.	- It		T	is.			1 .		-	Defec
TOTAL EXAMINED AT	24,201	Clothing U	Footgear U	Head. Body.	Ringworm.	Impetigo.	Other Diseases.	Kingworm.	Scabies	Other Diseases.	Slight,	Oral Sepsis.	For observation.	For Treatment (Adenoids).	Conditions. For observation (Tonsils).	For Treatment (Tonsils).	For Observation.	Treatment.	Blepharitis. Conjunctivitis.	Corneal Opacities.	Squint.	Other Diseases.	Defective. For Refraction.	Отпрова.	Other Diseases.	Grade I.	Grade IIA.	Grade III.	Defect. Artic.	Stammering.	Backward.	M.D. (Educable)	M.D. (Ineducabl	Nervous or Unsta	Behaviour Dime	Congenital. Acquired.	Functional.	Chronic Bronchit	T.B. Suspected.	Congenital.	Inf. Paral.	Rickets. Other Causes,	Infectious Disease	Other Diseases or
Boys Percentage Girls Percentage	3,826	173 4·52 155 4·1	9 0·24 14 0·37	62 79 1·62 2·06 596 66 5·76 1·75	7 0·18 1 0·03	36	30 0·78 28 0·74 0·	2 3	38 47 98 1·23 33 42 87 1·11	164 4·29 138 3·65	107 2·79 120 3·17 0·6	3 102 08 2.67 2 71 05 1.88	223 5·83 157 4·15	84 1	.56 963 :08 25·16 :29 800 :41 21·16			12 -31 1 -15 1	76 12 ·99 0·31 52 7 ·38 0·19	1 1	128 3·35 120 3·17	19 .		35 0.91 32 0.85	0:42	_ 0	7 — 18 — 8 —	-	27 0·71 12	6 0·16 1	3 0:	12 31 0.08 5		0.10 0.1	1 0.3	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	49 1·28 39	36 0.94 21		78 5 65 0·13 56 9	8 0·21 6	78 2·04 49	$\begin{bmatrix} 6 & 8 \\ 2 & 0.21 \\ 9 & 3 \end{bmatrix}$	121 3·16 112
G Boys Percentage Girls Percentage	3,999 4,109 4,102		0.93 9 0.21		8 0·2 1 0·03	28 0·70 17 0·41	28 0·70 14 0·34 0·	$\begin{array}{c cccc} \frac{4}{10} & 3 \\ 10 & 0.9 \\ \frac{4}{10} & 0.9 \end{array}$	39 47 38 1·17 14 57 34 1·39	139 3·48 104 2·53	137 3·43 0·6 97 2·36 0·6	3 62 08 1.55 2 57 05 1.39	195 4·88 147 3·58	51	22 625 05 15·63 90 721 19 17·55	264	545 13.63 0 477 11.6 0	11 ·28 10 ·24 1·24	61 10 53 0.25 66 13 61 0.32	2 0·05 5	78 1.95 64	$\begin{bmatrix} 13 \\ 0.33 \\ 19 \end{bmatrix}$	570 298 ·25 7·45	35 0.88 29 0.7	13 0·33 13 0·22		16 2 40 0.05 13 —	- - 1 0:02	18 0·45 6	60.15	10 0·25 4	13 0.03 39 11 08 0.28 16 4	- - 1	0·11 0·0 1 0·03 0·0 4 —		$\begin{array}{c cc} 32 & 0.56 \\ \hline 6 & 15 \\ 15 & 0.38 \\ 4 & 20 \end{array}$	1.03 48 1.20 47	0.56 - 16 0.40 ($\begin{array}{c c} - & 4\cdot 1 \\ \hline & 1 & 10 \\ 0\cdot 03 & 2\cdot 1 \\ 1 & 1 & 1 \end{array}$	13 0·24 09 3 73 0·08 11	0·16 6 0·15 2	$ \begin{array}{c cccc} 1 \cdot 3 & 0 \cdot 24 \\ \hline 52 & 11 \\ 1 \cdot 30 & 0 \cdot 28 \\ 26 & 20 \end{array} $	4 0.08 1 2 8 0.05 0 2	
Boys Boys Percentage Girls Percentage	3,917	-	0.68 7 0.18	36 97 0.88 2.36 770 118 9.66 3.01	0.09	11 0·27 15 0·38 0	19 0-46 9 0-23 0-	$\begin{array}{c cccc} 4 & 2 \\ 09 & 0.5 \\ 5 & 1 \\ 13 & 0.2 \end{array}$	11 42 51 1·02 11 37 28 0·94	97 2·36 98 2·50	75 1·83 97 2·48			40 0·90 31 0·79	92 567 24 13·82 43 566 10 14·45	143 3·49 202 5·16	325 7-92 231 5-9 0-	8 19 1	65 9 58 0·22 57 15 45 0·38	0·09 4	34 0.83 33	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	510 267 +43 6.51 555 274 -16 6.99	41 0.99 51	22 0·54 8		23 — 56 — 22 —		14 0.34 0	14	8 8 8 0·19 0·9	38 9 38 9 30 0-22 20 5	1 0·02 0·02 —	3 0·07 1	0.1	$\begin{array}{c cccc} 10 & 0.48 \\ \hline 4 & 12 \\ 09 & 0.29 \\ 3 & 25 \\ \end{array}$	30 0·73 70	0·15 0 15 0·36 ·	$ \begin{array}{c cccc} & 1.8 \\ & 2 & 10 \\ & 05 & 2.6 \\ & & 3 \end{array} $	0 0·27 07 11 01 0·27 13 11	0.05 0 4 0.09 6	18 37 0.44 0.90 14 18	0.05	2·09 69 1·68 100
d. Boys Percentage Girls Percentage Boys Boys	192	532	_					0.5	$\begin{bmatrix} 1 & -1 \\ 152 & 0.52 \end{bmatrix}$	10 3·60 4 2·08		1·45 4 2·08	1·45 —		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	0·36 —	1·45 - 2 - 1·04 -	_ ^	3 — 09 — 1 — 52 —		0·36 —		32 13 63 4·72 33 11 19 5·73	-		_ 0.	2 — 73 — 1 —			1 036	718 0.3	1 -)·03 0·0		0.64 1 - 1	1·79 5 1·82 3	0.15	1.4	4 — 1 — 1	0.15 0	2 0.73 0.73 0.73	0.05	2·55 6 2·18 11
Percentage Percentage Percentage	11,999	4·36 556	30 9	154 299 1·26 2·45 ,337 318 9·47 2·65	19 0·16 2 0·02	72 0·59 68 0·57 0	77 ·63 0·6 51 ·42 0·6	11 9. 09 0.8 11 4 09 0.4	8 136 0 1·14 9 137 11 1·14	410 3·36 344 2·87	319 2·61 314 2·62 0·0	7 208 6 1·70 4 183 3 1·52	528 4·33 395 3·29	192 33 1·57 3·6 166 16 1·39 1·3	73 2,167 06 17·76 53 2,091 17·43	672 5·51 799 6·66	1,678 13·75 1,395 11·62 0·	31 2 25 1 26 1 22 1	05 31 68 0·25 76 35 47 0·29	7 0.06 13 0.11	241 1·97 217 1·80	49 1,1 0·40 9· 51 1,3 0·42 10·	12 578 11 4·74 03 645 86 5·37	111 0.91 112 0.93	51 0·42 32 0·27		48 2 39 0.02 44 — 37 —		59 0·48 0 23 0·19 0	27 ·22 3 ·03 0	21 8 ·17 0·7 14 4 ·12 0·3	9 23 3 0·19 2 10 5 0·08	1 0·01 2 0·02 (8 0.06 0.0 9 0.07 0.0	2 02 02 0-1 5 1 04 0-1	21 56 17 0.46 19 67 16 0.56	132 1·08 159 1·32	67 0·55 0· 33 0·27 0	$ \begin{array}{c cccc} & & & & & & & & \\ & 4 & & & & & & \\ & & & & 393 & & & \\ & & & & & 3\cdot 2 & & \\ & & & & 1 & & 26 & & \\ & & & & & 2\cdot 2 & & & \\ \end{array} $	8 19 6 0·15 5 32 1 0·26	19 0·15 1 14 0·12 (- 0·52 50 66 ·23 0·54 80 43 ·74 0·36	10 0.08 7 0.06	262 2·15 309 2·57

^{*} Infant children not included.



TABLE III. (1944-45)

SYSTEMATIC MEDICAL EXAMINATIONS.

	Entr	ANTS.	SECOND A	GE GROUF.	THIRD A	GE GROUP.		y Schools Group,	To	TAL.
Classification.	No. of Children.	Per- centage.	No. of Children.	Per- centage.	No. of Children.	Per- • centage.	No. of Children.	Per- centage.	No. of Children.	Per- centage.
I. Children free from defects,	3,066	40.3	3,273	40.37	3,964	49.43	298	63.81	10,601	43.80
II. Children (otherwise free from defects) who suffer from:— (a) Defective Vision not worse than 6/12 in the better eye, with or without glasses;	Paradonani	ч	1,013	12.5	967	12.06	61	13.06	2,041	8.43
or (b) Conditions of mouth or teeth requiring		TO STATE OF THE ST								
treatment, (c) Both (a) and (b),	88	1.16	59 20	0·73 0·24	48 15	0·59 0·19	4 4	0·86 0·86	199 39	0·82 0·16
Total,	88	1.16	1,092	13.47	1,030	12.84	69	14.78	2,279	9.41
III. Children suffering from ailments (other than those mentioned in II.) from which complete recovery is anticipated within a few weeks,	3,166	41.62	2,655	32.74	2,050	25.56	60	12.85	7,931	32.77
IV. Children suffering from defects where (a) Complete cure may ultimately be ex-		-								
pected, (b) Improvement only	1,186	15.59	965	11.9	802	10.00	22	4.71	2,975	12.3
may be expected,	101	1.33	123	1.52	173	2.16	18	3.85	415	1.71
Total,	1,287	16.92	1,088	13.42	975	12.16	40	8.56	3,390	14.01
Total No. of children examined,	7,607	100%	8,108	100%	8,019	100%	467	100%	24,201	100%



TABLE IV. (1944-45.)

RETURN OF ALL EXCEPTIONAL CHILDREN OF SCHOOL AGE IN THE AREA.

_	IN THE AKE	Z X •		
	Disability.	At Ordinary Schools.	At Special Schools or Classes.	Total.
1.	Blind,	_	6	6
2.	Partially sighted— (a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition, (b) Other conditions of the eye, e.g., cataract, ulceration, etc., which render the child unable to read ordinary school books or to see	3	31	34
	well enough to be taught in an ordinary school,	6	11	17
3.	Deaí— Grade IIA,	106 2 1	4 1 83	110 3 84
£.	Defective Speech— (a) Defects of articulation requiring special educational measures, (b) Stammering requiring special educational measures,	95 32	8	103
5.	Mentally Defective (Children between 5 and 16 years)— (a) Educable (I.Q. approximately 50-70), (b) Ineducable (I.Q. generally less than 50),	64 4	302	366 15
6.	Epilepsy— (a) Mild and occasional, (b) Severe (suitable for care in a residential school),	17	12	29 I
7.	Physically Defective (Children between 5 and 16 years)— (a) Non-pulmonary tuberculosis (excluding cervical glands), (b) General orthopaedic conditions, (c) Organic heart disease, (d) Other causes of ill-health,	16 129 199 63	37 84 59 275	53 213 258 338
3.	Multiple Defects— (a) (b)	arment and a second	*186 †66	186 66

^{*} Mental Defect plus one or more physical defects.

I More than one physical defect.



TABLE V.

DENTAL INSPECTION AND TREATMENT (1944-45).

SCHOOL. MANAGEMENT							NUI	MBERS EX	AMINED.					þ		Number	S NOTIFIED.		1		Number o	6	ACTIONS.		FILI	LINGS.		1.)THER	Number of			CLASSI	IFICATION
Area.	5 yrs.	6 yrs.	7 yrs.	8 yrs.	9 yrs.	10 yrs.	11 yrs.	12 yrs.	10							-	7	TOTAL.	Percentage Requiring	of Pupils	Attend- ances	A.		Am	algam,	Cer	ment.		ATMENT.	, General Anaes-		SIONS.	OF PA	ATIENTS.
Area No. 1	175	192	193	199	180	183	177	-	13 yrs.	14 yrs.	15 yrs.	16 yrs.	17 yrs.	18 yrs.	Total.	Boys.	Girls,		Treatment.	Treaten,	made for Treatmen		Perm.	Temp.	Perm.	Temp.	Perm.	Temp.	Perm,	thetic Cases.	Treat- ment.	Inspec- tion,	Treat- ment.	Fee Paying.
,, ,, 2	364	392	448	418		103		166	157	56	35	13	4	-	1,730	302	300	602	34.7	344	360	363	69	_	121	_	8		34		41	24	110	234
., ., 3	787	852	865		410	431	371	393	376	55	13	1	-	-	3,672	698	612	1,310	35.6	651	659	634	123	_	219	_	_		90	_	711	21.1	954	1
4	996	1,065		876	905	965	937	873	802	241	68	27	1	-	8,199	1,340	1,317	2,657	32.4	1,178	1,211	1,238	193		314						711	70	254	397
" » 4	1		1,078	1,065	1,053	1,042	1,068	957	830	232	34	15	9	1	9,445	1,550	1,574	3,124	33.0	669	678	811	77		050				145	_	$137\frac{1}{2}$	12	465	713
,, ,, 3	523	725	683	711	694	640	677	605	487	76	2	1	_]	4_	5,824	1,800	1,777	3,577	61.0	461	525	1		_	258	3	28	_	221	- 1	77	98	307	362
,, ,, 6	1,547	1,576	1,579	1,469	1,485	1,539	1,473	1,548	1,452	452	192	119	68	17	14,516	3,916	4.566	8,482	58.4	401		581	93	_	231	_	_	-	90	-	78	43	245	216
,,,,7	715	667	762	734	763	759	601	556	461	35	_	_	_		6,053	1,826	,			1,971	2,533	2,372	312	_	587	491	61	-	166	-	287	105	671	1,300
,, ,, 8	661	667	695	659	628	652	531	408	378	71	q	9					1,813	3,639	60.1	949	1,117	1,313	130	10	241	154	60	-	184	-	145	51	388	561
,, ,, 9	1,122	1,157	1,109	1,055	1,106	1,077	933	689	500	83		,	_	1	5,363	1,785	1,801	3,586	69.0	1,138	1,386	1,406	265	25	524	_	5	-	492	-	176	43	472	666
,, ,, 10	797	857	903	920	809	904	820	571	503	153		1	1		8,842	1,940	1,907	3,847	43.5	1,550	1,655	2,001	162	13	386	99	41	-	92	1	175	72	519	1,031
,, ,, 11	915	995	885	827	953	917	869	1,070			50	46	20	1	7,354	1,117	1,234	2,351	31.96	911	919	974	72	4	200	1	12	-	32	1	91	52	372	539
,, ,, 12	1,814	1,720	1,766	1,776	1,649	1 694			1,131	251	100	63	16	-	8,992	3,687	3,511	7,198	80.0	1,239	1,527	1,900	152	9	326	248	181	_	204	_	211	66	642	597
,, ,, 13	2,204	2,056	2,231	2,033	2,040	2,002	1,648	1,852	1,821	576	299	210	96	9	16,930	2,967	2,787	5,754	34.6	1,023	1,039	1,291	199	_	343	_	30	_	239	_	129	114	570	453
,, ,, 14	769	746	690	677		2,031	2,086	2,136	2,045	637	344	149	89	15	20,096	4,577	3,741	8,318	45.0	1,778	2,110	1,816	198	39	618	52	69	2	484		274	136	624	1,154
Total	13,389	13,667	13,887	13,419	725	737	657	863	841	290	135	73	22	-	7,225	2,604	2,709	5,313	74.0	645	842	652	127	20	446	_	5	_	242	_	108	55	223	422
	11 1			13,419	13,400	13,571	12,848	12,687	11,784	3,208	1,290		326	44	124,241	30,109	29,649	59,758	48.0	14,507	16,561	17,352	2,177	120	4,814	1,048	509	9	2,715	9				
																			1		1					-,010	500		2,713		2,001	302 ½	5,862	8,645



TABLE VI, (1944-45).

VISUAL TREATMENT.

Showing number of children who received full ophthalmic examination, number re-examined, and the number for whom spectacles were prescribed or who were otherwise treated.

TREATMENT CENTRE.	Number of Children Examined.	Number of Children Re-examined.	Total Attendances.	Number for whom Spectacles were prescribed.	Number Treated otherwise or Advised.	Cases uncompleted and Cases not requiring Treatment.
Dr. John A. Mortimer. Blantyre Cadder	58 37	213 62	271 99	55 31	3 6	
(Bishopbriggs and Chryston) Carluke East Kilbride Lanark Larkhall Shotts Strathaven Uddingston Wishaw Knowetop Special School	35 3 86 49 33 25 80 188	$\begin{array}{c} 127 \\ 15 \\ 280 \\ 326 \\ 261 \\ 77 \\ 264 \\ 661 \\ 58 \\ \end{array}$	162 18 366 375 294 102 344 849 69	29 3 77 44 31 23 77 164 9	$ \begin{array}{c} 6 \\ -9 \\ 5 \\ 2 \\ 2 \\ 3 \\ 24 \\ 2 \end{array} $	
Dr. H. Somerville Martyn. Abington Airdrie Baillieston Bellshill Biggar Cambuslang Carnwath Lesmahagow Rutherglen	9 205 38 86 10 127 11 15 97	418 86 319 20 293 30 33 266	9 623 124 405 30 420 41 48 363	9 188 38 78 9 112 10 11 91	$\begin{bmatrix} -6 \\ -7 \\ 1 \\ 4 \\ -4 \\ 4 \end{bmatrix}$	$ \begin{array}{c cccc} & - & & \\ & 11 & & \\ & - & & \\ & 1 & & \\ & - & & \\ & 11 & & \\ & - & & \\ & 2 & & \\ \end{array} $
Dr. James Hill. Coatbridge Hamilton Motherwell Total	265 197 276 1,941	423 590 364 5,186	688 787 640 7,127	247 189 255 1,780	18 8 21 135	26



MINOR AILMENTS.

TABLE VII. (1944-45)

SHOWING (a) NUMBER OF CHILDREN TREATED AT EACH CLINIC; (b) TOTAL ATTENDANCES MADE; (c) NATURE OF AILMENT FROM WHICH THE CHILDREN SUFFERED.

	AIR	DRIE CL	INIC.	BAIL	LIESTO	CLINIC.	BEI	LLSHILL	CLINIC.	BLA	NTYRE C	LINIC.	CAMB	USLANG	CLINIC.	COA	TBRIDGI	E CLINIC.	HAN	MILTON C	CLINIC.	LAR	KHALL CI	LINIC.	мотни	ERWELL	CLINIC.	RUTH	ERGLEN	CLINIC.	SI	HOTTS CI	LINIC.	W	ISHAW CLINIC.
	Boys.	Girls. A	Total attendance.	Boys.	Girls.	Total Attendance	Boys.	Girls.	Total Attendance	Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance	Boys.	Girls.	Total Attendance.	Boys.	Girls. A	Total ttendance.	Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance.	Boys.	Girls.	Total Attendance	Boys.	Total Girls. Attendance
DISEASES OF THE EYE— Blepharitis Conjunctivitis, Corneal Ulcer, Corneal Opacities, Opbthalmia and Phlyctenular Conj. Keratitis-Interstitial, Hordeolum (Stye), Stillicidium, Other Diseases,	42 8 -2 - - 11 1	45 5 3 14 	950 33 	20- 12- 1- 1- 11-	28 8 1 3 1 — 11 —	833 136 11 80 4 76 1	52 23 1 — — — — 18 — —	78 26 1 — — — — — — — 17	1,129 393 6 — — — 114 — 25	25 19 — — — — 1	34 13 6 9 — — — — 16	449 193 36 133 — 34 — 17	50 46 3 6 - 14	35 36 - 1 - 1 9	589 481 3 137 — 1 45 — 75	44 18 1 3 — 15 —	. 61 12 3 3 1 —————————————————————————————	1,471 216 64 225 3 — 100	27 17 1 3 1 -2	31 13 — — — — 5	611 213 11 54 18 —	10 5 1 1 2	10 7 - - - 1	178 61 6 2 5	18 9 - 1 - 4	14 7 — 1 — 1	388 89 9 25	39 31 2 - 1 12 - 5	39 28 1 — — — —	541 443 9 2 84 34	5	1 3 1	76 25 — — — — 2	14 5 1 — —	30 608 6 24 — 3 1 17 — 5 23 — -
Total,	64	67	1,130	45	53	1,141	96	123	1,669	48	79	862	132	88	1,331	83	116	2,094	52	49	929	19	19	254	32	23	511	90	91	1,113	6	7	130	21	42 676
DISEASES OF THE SKIN— Impetigo Contagiosa, Eczema, Alopecia Areata, Scabies, Pediculosis Capitis, with Impet. Contag., Pediculosis Capitis, Dermatitis Seborrheica, Wounds and Septic Sores, Psoriasis, Other Skin Diseases,	212 10 4 142 8 -3 33 228 1 57	114 6 131 25 8 7 138 5 64	1,936 85 10 1,241 66 10 145 1,591 12 230 5,326	104 13 3 86 — 16 252 1 35	62 11 2 70 12 26 25 224 56 488	1,018 224 51 970 93 234 306 2,123 3 527	122 2 1 61 3 43 390 3 52	98 10 	1,034 81 1 226 22 5 395 2,885 71 500	125 10 1 148 1 7 6 301 42	67 111 2 118 16 18 8 230 1 56	816 190 13 1,092 71 45 51 1,785 1 290	132 19 5 42 1 1 7 530 	102 15 1 41 4 29 6 288 6 147	1,055 322 27 229 17 52 44 3,097 16 1,358	246 4 2 212 ———————————————————————————————	184 4 1 251 20 12 19 408 3 30	1,637 73 57 2,369 38 20 220 3,514 91 293	145 16 1 134 8 5 5 285 244	88 13 1 150 28 19 1 182 1 34	1,277 275 15 1,485 201 92 15 2,363 52 314	70 11 1 85 3 2 1 106 	42 14 2 107 15 3 1 116 1- 27	454 114 22 599 57 19 4 1,144 4 206 2,623	116 . 13 . 1 . 153	60 10 3 118 — 5 9 80 2 15	703 130 15 1,792 ————————————————————————————————————	87 17 3 36 — 12 383 1 91	58 17 3 44 8 5 9 298 108	832 301 119 253 13 12 136 2,967 1 1,094	16 91 11 -7	13 105	145 ————————————————————————————————————	128 20 92 1 10 131 5 26 413	89 929 14 328 2 61 118 1,230 11 24
Diseases of the Ear— Chronic Suopurative Inflammation, Ceruminous Collection, Chronic Catarrh, Other Diseases, TOTAL,	34 4 11 1 50	28 4 6 1	928 14 104 4	17 — — — —	21 2 1 1	533 3 10 17	44 3 - 8	36 5 - 9	871 47 	22 3 1 3	16 4 2 3	437 12 7 11	27 3 4 13	19 3 2 10	600 17 16 75	54 8 10 —	38 6 8 —	1,767 20 84 —	22 6 1 9	23	894 25 15 37	19 1 2 1	13 1 1 4	359 10 15 22	36 2 - 4	13 4 1 2	364 24 10 22	19 2 1 4	18 5 	489 32 20 70	31	2 - 1	62 - - 5	18 1 -	15 628 2 9 — — — 17 637
Diseases of the Nose— Nasal Catarth Nasal Obstruction,	8	2	91	2 8	2 6	161 33	3 2	3	22 10	7 3	3 2	64 23	47	18	715 18	10	12	272	10 10	26 2 2	971 181 166	23 5	19 * 2 2	54 53	11 —	6	123	8 2	33	45	1		4	8	11 422
Total,	8	2	91	10	8	194	5	4	32	10	5	87	52	19	733	11	13	278	20	4	347	9	4	107	- 11	7	125	10	3	53	1		4	8	11 422
Ringworm of Head, Ringworm of Body,	0.05	39 166	6,430 2,076	7 14	1 15	112 296	2 3		14 21			34	2		7 22	115	15 203	1,042	1	<u>-</u>	1	5		13		_		2 5		7 30	1		5	_	
Тотаі,	771	205	8,506	21	16	408	5	2	35	4	2	34	6	5	29	214	218	1,722	2	2	28	9		93		_		7	6	37	1		5		

^{*} School Nursing Staff also treated 91 Boys and 60 Girls, who made 529 attendances, at The Health Institute, Cambuslang.



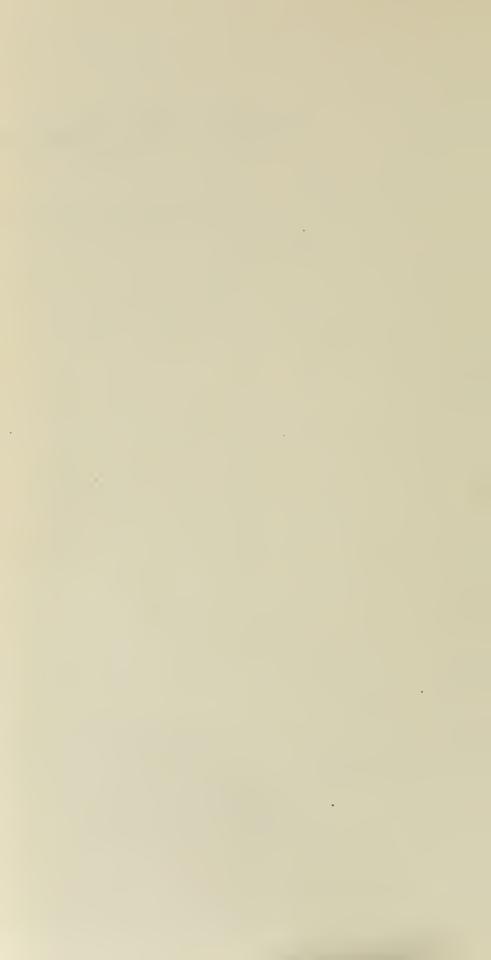
TABLE VIIa. (Supplementary), 1944-1945.

MINOR AILMENTS (Treatment at Emergency Clinics).

						i i						
	EY	ZE DISE	ASES.	- S	KIN DIS	EASES.	EA	R DISE	ASES.	DISE	ASES OF	F NOSE.
	Boys.	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.	Boys.	Girls.	Attend- ances.
	2	2	5	104	92	. 794		5	9			9
•••	9	9	42	182	129	1,246	13				2	3
•••	11	23	571	226	136	2,672	27	11		1	2	61
•••	8	13	411	90	97	1,486	19	7				01
•••	10	10	168	69	68	596	12	7		ı	9	12
•…	4	12	398	58	93	1,442	3	7				27
	4	9	92	272	279	2,381	6	6				21
	30	38	484	476	341	3,602	2	5	•)		9	18
•••	10	18	233	392	299	2,215	7	5			2	18
	25	21	757	262	200	2,238	6			2	9	7~
	18	28	935	158	127	2,474	22	15	442	1		75 29
	131	183	4,096	2,289	1,861	21,146	117	88	1,954	7	11	225
		Boys. 2 9 11 8 10 4 4 30 10 25 18	Boys. Girls. 2 2 9 9 11 23 8 13 10 10 4 12 4 9 30 38 10 18 25 21 18 28	Boys. Girls. ances. 2 2 5 9 9 42 11 23 571 8 13 411 10 10 168 4 12 398 4 9 92 30 38 484 10 18 233 25 21 757 18 28 935	Boys. Girls. Attendances. Boys. 2 2 5 104 9 9 42 182 11 23 571 226 8 13 411 90 10 10 168 69 4 12 398 58 4 9 92 272 30 38 484 476 10 18 233 392 25 21 757 262 18 28 935 158	Boys. Girls. Attendances. Boys. Girls.	Boys. Girls. Attendances. Boys. Girls. Attendances. 2 2 5 104 92 794 3 9 9 42 182 129 1,246 11 23 571 226 136 2,672 8 13 411 90 97 1,486 10 10 168 69 68 596 4 12 398 58 93 1,442 4 9 92 272 279 2,381 30 38 484 476 341 3,602 10 18 233 392 299 2,215 11 25 21 757 262 200 2,238 11 28 935 158 127 2,474	Boys. Girls. Attendances. Boys. Boys. Boys. Girls. Attendances. Boys. Girls. Attendances. Boys. 104 92 794 — 1194 123 571 226 136 2,672 27 110 10 168 69 68 596 12 110 10 168 69 68 596 12 111 2398 58 93 1,442 3 111 30 38 484 476 341 3,602 2 112 398 392 299 2,215 7 113 25 21 757 262 200 2,238 6 114 22 395 158 127 2,474 22	Boys. Girls. Attendances. Boys. Girls. Attendances. Boys. Girls. Attendances. Boys. Girls. Girls.	Boys. Girls. Attendances. Boys. Girls. Attendances. Boys. Girls. Attendances. Boys. Girls. Attendances. 2 2 5 104 92 794 — 5 9 9 9 42 182 129 1,246 13 9 105 11 23 571 226 136 2,672 27 11 353 8 13 411 90 97 1,486 19 7 264 10 10 168 69 68 596 12 7 87 4 12 398 58 93 1,442 3 7 58 4 9 92 272 279 2,381 6 6 103 30 38 484 476 341 3,602	EYE DISEASES. SKIN DISEASES. EAR DISEASES. DISEASES. Boys. Girls. Attendances. Boys. Boys. Attendances. Boys. Boys. Girls. Attendances. Boys. Boys. Attendances. Boys. Boys. Boys. Attendances. Boys. Boys. Boys. Boys. Boys. Attendances. Boys. Boys. Boys. Attendances. Boys. Boys. Boys. Attendances. Boys. Boys. Boys. Attendances. Boys. Boys. Boys. Boys. Boys. Attendances. Boys. Boys. Boys. Boys. Boys. Boys. Boys. Boys. Boys. Attendances. Boys. Boys.	Boys. Girls. Attendances. Boys. Girls. Attendances. Boys. Girls. Attendances. Boys. Girls. Attendances. Boys. Girls. Girls. Attendances. Boys. Girls. Girls. Attendances. Boys. Girls. Girls. Girls. Girls. Girls. Colored ances. Boys. Girls. Girls. Girls. Girls. Girls. Girls. Colored ances. Boys. Girls. Girls. Girls. Girls. Girls. Colored ances. Boys. Girls. Girls

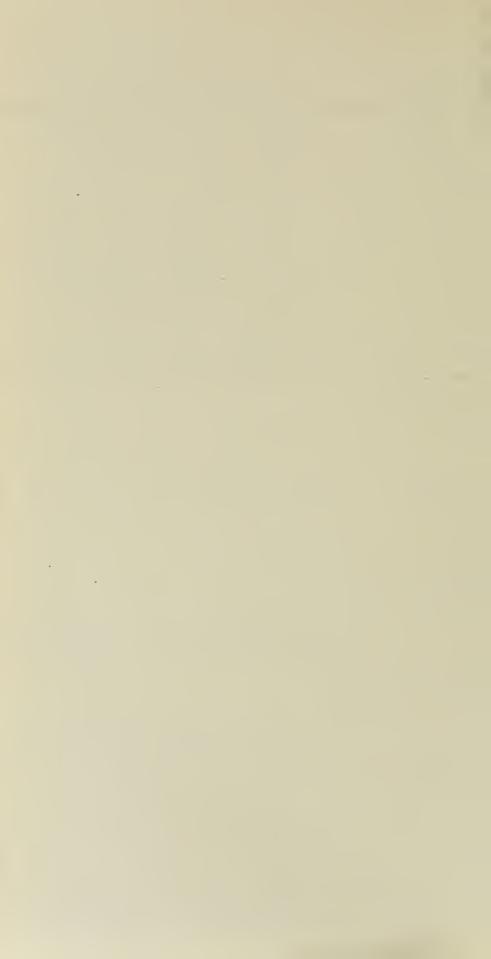
Total number of children treated 4,687

Total number of attendances made 27,421



NUTRITIONAL SURVEY SESSION, 1944-45 (Medical)

							-	_			6					-	_				-																																						
		development).		Calculate seasons End	(deficiency).		Subrutamona Fot follows	Subcurintedus I'nt (obese).	Organic Heart Disease	(congenital).	Organic, Heart, Disease (acquired).		Chronic Bronchial Catarrh,		Response to Exercise Tolerance Test.		Dynamical Discharition	Lycs (Chronic Dispitations)			Eyes (Chronic Conjunctivitis).			Eyes (Cornea—dimness or opacity).			Eyes (Pallor of Conjunctival Mucous Menibranes).			Angular Stomatitis.			Upper Respiratory Tract	(Chronic Catarrh).			Upper Respiratory Tract (Otorrhoea).			Upper Respiratory Tract (Deafness, Right Ear).			Upper Respiratory Tract (Deafness, Left Ear).		4	Posture Faulty.		Parliveio	Sconosis.		Lassitude.		Ale Debouter Changae	Early Fuberty Cnanges.	Psychological Maladjustment.	pparent State of Well-being		if.	ı,
No.	Mild.	Marked.	No.	Medium.	Marked.	No.	Medium.	Marked.	No.	No.	Yes.	Müd.	Medium.	No.	Good	Poor Mild.	Medium	Marked.	No.	Mind.	Marked.	No.	Mild.	Medium.	No.	Nild.	Medium.	Marked	Mild.	Medium.	Marked.	No.	Medium.	Marked.	No.	Mild.	Marked.	No.	Mild.	Marked.	No.	Mild.	Marked	No.	Mild. Medium.	Marked.	No. Mild.	Medium.	Marked.	No. Mild.	Medium.	Marked.	Yes.	No.	Yes. F	Good	Poor.	Average Heigh	Average Weigh
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21	2 -	1-1	24	4 -	-	22 1	2 -	_ 2-	4 -	26 -	_ 26	2 -	- -	- 24	26	— 3 ·	-		23 -	- -		26 -	- -	- -	26	3	_ -	_ 23	1	1	-	24	5 1	-	20 -	- -		26	1 -	\ -'	25 -	_ -		26	3 —	_ 5	23	-	_ 26	26 2		_ 24	-	26	2 24	26 -	_ 43	£3·1	40.33
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	3 1 -		01	9 _		76	2 —	- 8	3 1	84	1 84	4	1 -	- 80	85	_ 2			83	1		84 -			85	13	1 -	- 71		_	<u> </u>	85 14	4	-	67 –	1_	1	84	1, -		84	1 —	-}	84 8	1	_ 76	6 1	1 -	_ 83	2	2 -	- 81	-1-	— 6	79	84 1			
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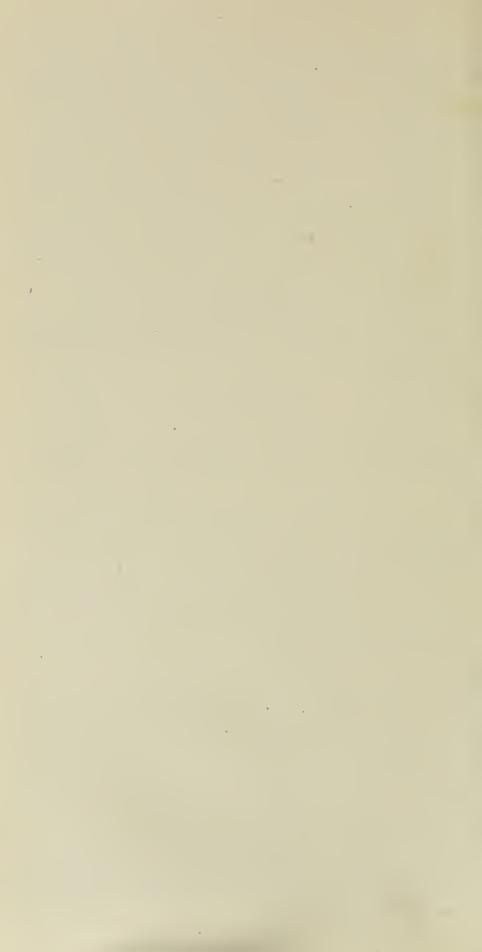
NUTRITIONAL SURVEY SESSION, 1944-45 (Medical)

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	e Examined. P. Efficiency of Motion.	Participation in Milk in Schools Scheme.	Hot Meai at Home, either	Regular Participation in Organised Games.	Membership of Youth Organisation.	is Disease.	Etc. Upset.	1688.	Mects of Recent or Past Illness.	Skin-pyogenic Infections.		Somatic Musculature (flabby)	cone);		Somatic Musculature (under development).		Subcutaneous Fat (deficiency).		Subcutaneous Fat (obese(.		Organic Heart Disease (congenital).	Organic Heart Disease (acquired).		Chronic Bronchial Catarrh.	Response to Exercise	Tolerance Test.	Eyes (Chronic Blepharitis)		-	Eyes (Chronic Conjunctivitis),		Eyes (Cornea—dimness or opacity).		Eyes (Pallor of Conjunctival) Mucous Membranes).		Angular Stomatitis.			Chronic Catarrh).		Upper Respiratory Tract (Otorrhoca).		Upper Respiratory Tract Deadness, Right Ear).
GIRLS BORN 1931	Satis- factory Unsatis	Yes.	No. Yes.	No.	No.	Infection	" Colds," Digestive	Accident Other Illi	Present I	Mild. Medium.	Marked.	Mild. Medium.	Marked. No.	Miid. Medium.	Marked.	No. Mild.	Medium.	No. Mild.	Medium.	Marked.	No.	Yes.	Mild.	Marked.	No. Good	Poor .	Medium	Marked. No.	Mild. Medium.	Marked.	Mild.	Medium. Marked.	No. Mild.	Medium. Marked.	No.	Mild. Medium.	Marked.	Mild.	Marked. No.	Mild.	Marked.	Mild.	Medium.
GROUP A— Miners GROUP B— Heavy Industry GROUP C—	32 30 2 5 34 30 4 1	19 15 16	18 18	16 33	1 22 12	- 2	9 3	_ 3	-/	1 2 -	- 3i	1	— 33 J	-1-	- 3	4 2 -	-1-1	32 6	- -	- 28 -	34	_ 34	1	_ 3	3 33	1 2	1 -	_ 31		_ 3	1 _ -	_	34 1	1 -	32 1	1 -	33	1 9	30		31 — 31		i -
	15 15 — 17 17 — 98 92 6 4	1 10 11	0 0	11 17 -	- 6 11	2 2	? 7	— 3		-11-11-	- 17 -		_ 17			7 1		10 0			11111																						- -
BOYS BORN 1931 GROUP A- Miners GROUP B-	28 27 1 1										и	1	1			14														1			1			M							
GROUP C— Farmers	14 14	- 14 11	\$ 3 1	11 13 -	22 9	_ 1 _ 2	5 1	2 2 - 2		3 1 -	- 27 - 14 -	1	_ 30 _ 14	1 -	_ 30 _ 14	6 -	- - 1 _	25 — 12 —	1 -	30 -	31	— 31 — 14	1 2	_ 28	31	_ 2		- 29	1 -	_ 30 _ 14			81 1 -	_ -	30 1		30	4 2	_ 25	_ 1	- 30		
Agricultural Workers	88 87 1 3	7 51 42	46 46 4	12 87 1	45 43	_ 4	31 7	5 10		1 -	15 -	3 1 -	- 15 - 84	1 1	- 15 - 86	15 3	3 –	13 — 70 1	1 -	86 _	15	— 15 — 88	2 2	— 15 — 84	15 15 -	_ _ _ 5		83	1 -	- 14 - 84		— 15 — 88	5 — -		15 I 84 2		- 14	1 - 8 2	14 1 77	1 2	— 15 — 85	1 -	1

1944-45 (Medical)

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Somatic Musculature (flabby)	Eyes (Chronic Conjunctivitis).				Eves (Cornea—dinness or	opacity).			Eves (Pallor of Conjunctival	Mucous Membranes).				Angular Stomatitis.			Trans Daniel Com	Chronic Catarrh).			Unner Respiratory Tract	(Otorrhoca).			Upper Respiratory Tract	(Leaness, lught Ear).			Upper Respiratory Tract	(Dearness, Left Ear).			Posture Faulty.				Scotiosis.			assitude			Early Puberty Changes.		Psychological Maladjustment,		Apparent State of Well-being	,	
Medium.	Marked	M-1FRed.	No,	Mild.	Modium,	Marked.	Nc.	Mild.	Medium.	Marked.	No.	Mild.	Medium.	Marked.	No.	Mild.	Medium.	Marked.	No.	Mild.	Medium.	Marked.	No.	Mild.	Medium.	Marked.	No.	Mild.	Medium.	Marked.	No.	Mild.	Medium.	No.	Mild.	Medium.	Marked.	No.	Mild.	Medium.	Marked.	No.	Yes.		Ī	No.	Good.	Average Heigh	Average Weigh
_ 2	-	- 4	30	-	_	_	32	3	1	_	28		1	-	31	1	2	-	29	1	_		31	1	_	_ :	31	_	1	_/	31	6 -	-\-	26	1			31	2			30	22	10 -	- 8	32 3	32 _	58-76	91-1
	-	- :	34	-			34	1	1	-	32	1	-		33	1	3	-	30		3	-	31	-	1	- 8	33 -	-	- -	_	34	8	i	25	1	1	pre .	31	2	_		32	20	14	2 3	12 3	34 <u> </u>	59-61	91.6
	-	- i	15	-	-	-	15	-	-	-	15	-		-	15	-	_		15		Н	-	15		- -	_ 1	15 -	-	_	-	15	1 -	-\-	14	-	-		15	_	-	-1	15	10	5 -	- 1	5 1	5 _	61.22	100-0
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	-		54	_		-	88	4	-	_	84	2			86	8	2	1	77	1	2		85	1	-6	1 8	36 -	-11	2 -	- 8	8 I	8 —												4 1					





NUTRITIONAL SURVEY SESSION, 1944-45 (Dental)

Number of 6-year-old Molars Present (Entrants). Number of other Permanent Teeth	5-year-old Molars	per of Deciduous Teeth Present ers).	Teeth Requiring Extrac-	Fillings Required.	s Completed.	n with	with him	Gum Con	with	Irregu-	Mottled	olastic			IES.	CAR				cted		sing	s.	Defect.		
5-year-old Molars	5-year-old Molars	per of Deciduous Teeth Pre	Teeth Requiring Ext	lings Required.	s Completed.		with	with	th it	Ir	1 2									Lac		Mis	sct)ef		
	- 4-	Number (Leavers	Number of tion.	Number of Fil	Number of Filling	Number of Childrer Ulcerative Gingivitis.	Number of Children Sore Bleeding Gums.	Number of Children Marginal Gingivitis.	Number of Children w Healthy Gums.	Number of Children with larities of Teeth.	Number of Children with M Enamel.	Number of Children with Hypoplastic Teeth.	Number of Cavities.	Number of Children with Extensive Caries.	Number of Cavities.	Number of Children with More Severe Caries.	Number of Cavities.	Number of Children with Slight Caries.	Number of Teeth.	.Number of Children with Extra Teeth.	Number of Teeth.	Number of Children with M Tecth.	Number of Children with Defects.	Number of Children with no L	Number of Children.	
52		_	45	105	_	_	_	6	45		_	_	47	22	43	23	62	32	42	13	12	6	41	10	51	Miners— (1939)
		9	38	148	12	_	8	33	17	10	_	1	38	23	16	10	132	49	85	36	68	28	56	2	58	1931)
		Ü	00	t																						HEAVY INDUSTRY-
78	78	_	45	96	_		2	. 11	42	_		_	45	24	42	21	54	27	54	.17	10	8	51	4	55	(1939)
	9 —	9	31	134	44	_	6	33	21	7 .	_	_	31	18	21	17	113	49	52	32	51	27	59	1	60	1931)
				}																	,	:				& D—FARMERS AND ULTURAL WORKERS—
43 3	43		31	99	_	_	_	5	47	-	_	_	31	14	4 8	24	54	29	48	12	9	9	40	12	52	(1939)
	3 —	16	24	. 160	12	_	9	33	14	8	$_2$	1	24	17	17	11	143	51	71	27	68	22	54	2	56	(1931)
173	4 173	34	214	742	68		25	121	186	25	2	2	216	118	187	106	558	237	352	137	218	100	301	- 31	332	Total
173 9	173	-	121	300			2	22	134		_	_	123	60	133	68	170	88	144	42	31	23	132	26	158	TRANTS (1939)
- -	1 -	34	93	442	68	}	23	99	52	25	2	2	93	58	54	38	388	149	208	95	187	77	169	5	174	AVERS (1931)
173 9	173	34	214	742	68	-	25	121	186	25	2	2	216	118	187	106	558	237	352	137	218	100	301	31	332	GRAND TOTAL
	9 6 1 1	9 - 9 - 16 - 34 - 34	38 45 31 31 24 214 121 93	96 134 99 160 742 300 442	12 — 44 — 12 — 68 — 68	- - - -	2 6 - 9 25 - 2 23	33 11 33 5 33 121	17 42 21 47 14 186	- 8 25			45 31 31 24 216 	24 18 14 17 118 60 58	42 21 48 17 187	21 17 24 11 106 68 38	54 113 54 143 558 170 388	27 49 29 51 237 88 149	54 52 48 71 352 144 208	17 32 12 27 137 42 95	10 51 9 68 218	8 27 9 22 100 23 77	51 59 40 54 301	12 2 31 26 5	55 60 52 56 332 158 174	(1939) (1931) & D—FARMERS AND ULTURAL WORKERS— (1939) TOTAL TOTAL TRANTS (1939) AVERS (1931)

